

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

American Hospital Association PAC

ADDRESS (number and street) ▼

325 Seventh Street, NW

Suite 700

☐ Check if different than previously reported. (ACC)

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00106146

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☒ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
08 01 2012

through

M M M / D D D / Y Y Y Y Y Y  
08 31 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ms. Melinda Hatton

Signature of Treasurer

Ms. Melinda Hatton

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
09 20 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Hospital Association PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
08 01 2012 To: M M / D D / Y Y Y Y Y Y  
08 31 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2012</span>		<span style="border: 1px solid black; padding: 2px;">3059823.23</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">3712703.80</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">203880.37</span>	<span style="border: 1px solid black; padding: 2px;">1440374.06</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">3916584.17</span>	<span style="border: 1px solid black; padding: 2px;">4500197.29</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">68121.60</span>	<span style="border: 1px solid black; padding: 2px;">651734.72</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">3848462.57</span>	<span style="border: 1px solid black; padding: 2px;">3848462.57</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American Hospital Association PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	2

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

114874.68

601170.63

(ii) Unitemized .....

50637.39

227594.12

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

165512.07

828764.75

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

5000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

165512.07

833764.75

## 12. Transfers From Affiliated/Other

Party Committees.....

38000.00

602665.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

44.15

134.15

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

1500.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

324.15

2310.16

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ..... ▶

203880.37

1440374.06

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

203880.37

1440374.06

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	121.60	3084.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	121.60	3084.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	68000.00	648650.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	68121.60	651734.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	68121.60	651734.72

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	165512.07	833764.75
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	165512.07	833764.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	121.60	3084.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	44.15	134.15
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	77.45	2950.57

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. David C. Gessel J.D.**

Mailing Address 2180 S. 1300 East  
#440

City State Zip Code  
Salt Lake City UT 84106-2813

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UHA, Utah Hospital Association

Occupation

Vice President, Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
08 / 13 / 2012

**Transaction ID : 20268007**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Mr. Si Hutt**

Mailing Address 150 West 100 North

City State Zip Code  
Vernal UT 84078-2036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ashley Valley Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
08 / 13 / 2012

**Transaction ID : 20268008**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Phillip M. Willcoxon**

Mailing Address 3702 Fawn Trail

City State Zip Code  
Joplin MO 64804-6027

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Freeman Health System

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
08 / 09 / 2012

**Transaction ID : 20268375**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

850.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Daniel Lauffer**

Mailing Address 1039 Pendleton Place

City

Hurricane

State

WV

Zip Code

25526-9484

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Saint Francis Hospital

Occupation

Senior Vice President and Chief Operat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 10 / 2012

Transaction ID : 20268382

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Ms. Teresa E. McCabe**

Mailing Address 212 Station Terrace East

City

Martinsburg

State

WV

Zip Code

25403-4006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WVU Hospitals - East

Occupation

VP Markeing / Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 10 / 2012

Transaction ID : 20268387

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. William T Richardson**

Mailing Address 302 West 24th Street

City

Tifton

State

GA

Zip Code

31794-2808

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tift Regional Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20268407

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Randy Sauls**

Mailing Address 1117 N Lakeshore Drive

City State Zip Code  
 Valdosta GA 31605-5917

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 South Georgia Medical Center

Occupation  
 Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20268414

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Stephen C Shepherd**

Mailing Address PO Box 1052

City State Zip Code  
 Statesboro GA 30459-1052

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Burke Medical Center

Occupation  
 Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20268417

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Kurt Stuenkel FACHE**

Mailing Address 35 Huntington Rd. SW

City State Zip Code  
 Rome GA 30165-6661

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Floyd Medical Center

Occupation  
 President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20268418

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 151  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Dr. Gary R Ulicny PhD**

Mailing Address 2020 Peachtree Road NW

City	State	Zip Code
Atlanta	GA	30309-1465

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Shepherd Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	09	/	2012

**Transaction ID : 20268419**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mr. Timothy R. Hearn**

Mailing Address P.O. Box 44670

City	State	Zip Code
Baltimore	MD	21236-6670

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sheppard and Enoch Pratt Hospital

Occupation

Trustee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	06	/	2012

**Transaction ID : 20277979**

Amount of Each Receipt this Period

408.00

Full Name (Last, First, Middle Initial)

**C. Ms. Christine R Wray**

Mailing Address P O Box 527

City	State	Zip Code
Leonardtown	MD	20650-0527

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medstar St. Mary's Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	06	/	2012

**Transaction ID : 20278000**

Amount of Each Receipt this Period

510.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1418.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Steven Gautney**

Mailing Address 1236 US Hwy 41 S

City State Zip Code  
Vienna GA 31092-7740

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Crisp Regional Hospital

Occupation  
Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20278017**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Paul P Hinchey**

Mailing Address 127 East 46th Street

City State Zip Code  
Savannah GA 31405-2118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
St. Joseph's Hospital

Occupation  
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20278023**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Charles A Stark FACHE**

Mailing Address 707 Center Street, Suite 400

City State Zip Code  
Columbus GA 31901-1575

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Columbus Regional Healthcare System

Occupation  
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20278039**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Philip R Wolfe**

Mailing Address 2716 Wynnton Drive

City

Duluth

State

GA

Zip Code

30097-3706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gwinnett Hospital System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20278048**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Dale E Thornton MPH, CHE**

Mailing Address 45 St Lawrence Drive

City

Tiffin

State

OH

Zip Code

44883-8310

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mercy Tiffin Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

08 / 06 / 2012

**Transaction ID : 20281069**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Mr. Greg Sanders**

Mailing Address 6131 Willow Lake Drive

City

Hudson

State

OH

Zip Code

44236-3953

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lake Health

Occupation

Executive Director, Lake Health Founda

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 06 / 2012

**Transaction ID : 20281070**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 151

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

**A. Mr. Kirk Patrick**

Mailing Address 8405 Eustis Farm Ln

City

Cincinnati

State

OH

Zip Code

45243-4213

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Christ Hospital

Occupation

Chair, Physician Leadership Developmen

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 06 / 2012

Transaction ID : 20281074

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mr Rick Cicero**

Mailing Address 7946 Deborah Court

City

Mentor

State

OH

Zip Code

44060-7320

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lake Health

Occupation

Vice President Business Development

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 06 / 2012

Transaction ID : 20281646

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Steve Karns**

Mailing Address 6379 Ledge Lake Ct.

City

Painesville

State

OH

Zip Code

44077-9749

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lake Health

Occupation

Senior Vice President Admin Services

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 06 / 2012

Transaction ID : 20281647

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

1000.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael Kittoe**

Mailing Address 1429 Oakwood Tr

City

Painesville

State

OH

Zip Code

44077-7616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lake Health

Occupation

Chief Financial Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 06 / 2012

Transaction ID : 20281648

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Ms. Mary Ogrinc**

Mailing Address 1980 E. 221st Street

City

Euclid

State

OH

Zip Code

44117-2102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lake Health

Occupation

Senior Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 06 / 2012

Transaction ID : 20281649

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Gary J Robinson**

Mailing Address 10 East Washington Street

City

Painesville

State

OH

Zip Code

44077-3460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lake Health

Occupation

Vice President Government and Communit

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 06 / 2012

Transaction ID : 20281650

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Joyceanne Taylor**

Mailing Address 9125 Taylor-May Rd.

City State Zip Code  
Chagrin Falls OH 44023-1641

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lake Health

Occupation

Chief Quality Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
08 / 06 / 2012

Transaction ID : 20281651

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Dr. Gary S. Collier**

Mailing Address 4160 Tallman Trail

City State Zip Code  
Dayton OH 45430-1970

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Miami Valley Hospital

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
08 / 06 / 2012

Transaction ID : 20281660

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Ms. Mary C. Becker**

Mailing Address 7800 South Eagle Road

City State Zip Code  
Columbia MO 65203-9017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Missouri Hospital Association

Occupation

Senior VP, Commc. & Health Improvement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

MM / DD / YYYY  
08 / 09 / 2012

Transaction ID : 20281748

Amount of Each Receipt this Period

43.75

**SUBTOTAL** of Receipts This Page (optional)..... ►

543.75

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Herb B Kuhn**

Mailing Address 5310 Saddlebrooke Lane

City State Zip Code  
 Lohman MO 65053-9353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Missouri Hospital Association

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20281759

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Mr. Daniel R. Landon**

Mailing Address 1811 Forest Park Court

City State Zip Code  
 Jefferson City MO 65109-9782

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Missouri Hospital Association

Occupation

Sr. Vice President, Governmental Relat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20281760

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

**C. Ms. Kathleen C. Poff**

Mailing Address 5119 Coventry Way

City State Zip Code  
 Jefferson City MO 65101-8284

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Missouri Hospital Association

Occupation

Senior Vice President & CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

08 / 09 / 2012

Transaction ID : 20281765

Amount of Each Receipt this Period

43.75

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

231.25

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Bruce Bergherm**

Mailing Address 1395 South Pinellas Avenue

City

Tarpon Springs

State

FL

Zip Code

34689-3790

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Florida Hospital North Pinellas

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20281770**

Amount of Each Receipt this Period

450.00

Full Name (Last, First, Middle Initial)

**B. Ms. Linda Chen**

Mailing Address 2336 South Mountain Brook Dr

City

Hacienda Heights

State

CA

Zip Code

91745-5621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Florida Hospital for Children

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20281771**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Ms. Wayne Chutkan**

Mailing Address 11030 SW 160 Street

City

Miami

State

FL

Zip Code

33157-2803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mount Sinai Medical Center

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20281772**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

950.00



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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. David J Davidson**

Mailing Address 303 North Clyde Morris Boulevard

City

Daytona Beach

State

FL

Zip Code

32114-2709

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Halifax Health Medical Center of Dayto

Occupation

Legal Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20281773**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mr. Steven M Fine**

Mailing Address 8080 Cleary Boulevard  
Suite #815

City

Plantation

State

FL

Zip Code

33324-1368

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Palmetto General Hospital

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20281775**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**c. Dr. Robert Goldszer MD**

Mailing Address 4300 Alton Road

City

Miami Beach

State

FL

Zip Code

33140-2800

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mount Sinai Medical Center

Occupation

Senior Vice President and Chief Medica

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20281777**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Tom Gillette**

Mailing Address 4300 Alton Road

City

Miami Beach

State

FL

Zip Code

33140-2800

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mount Sinai Medical Center

Occupation

Vice President and Chief Information O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282067

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Hugh Greene**

Mailing Address 800 Prudential Drive

City

Jacksonville

State

FL

Zip Code

32207-8202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baptist Health

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282068

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Mr. William Griffin**

Mailing Address 6193 Shoreline Dr

City

Port Orange

State

FL

Zip Code

32127-5959

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Halifax Health Medical Center of Port

Occupation

Director System Research & Planning

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282069

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Karen Hermanson**

Mailing Address 5600 Collins Ave  
Apt. 4G

City State Zip Code  
Miami Beach FL 33140-2403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mount Sinai Medical Center

Occupation

Vice President, Patient Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20282070**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Arnold Jaffee**

Mailing Address 4300 Alton Road

City State Zip Code  
Miami Beach FL 33140-2800

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mount Sinai Medical Center

Occupation

Vice President Legal and Regulatory Af

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20282071**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Arvin Lewis**

Mailing Address 778 Foxhound Drive

City State Zip Code  
Port Orange FL 32128-7003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Halifax Health Medical Center of Dayto

Occupation

Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20282124**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Ann Martorano**

Mailing Address 914 Clubhouse Blvd

City

New Smyrna Beach

State

FL

Zip Code

32168-7962

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Halifax Health Medical Center of Port

Occupation

Administrator

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282125

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mr. Alex A Mendez**

Mailing Address 4300 Alton Road

City

Miami Beach

State

FL

Zip Code

33140-2800

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mount Sinai Medical Center

Occupation

Senior Vice President and Chief Financ

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282127

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Ms. Karen Moyer**

Mailing Address 7400 SW 57th Terrace

City

Miami

State

FL

Zip Code

33143-1729

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mount Sinai Medical Center

Occupation

Senior VP, CNO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282152

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

**A. Mr. David Ottati**

Mailing Address 60 Memorial Medical Parkway

City

Palm Coast

State

FL

Zip Code

32164-5980

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Florida Hospital-Flagler

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282153

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Ms. Angel Pallin**

Mailing Address 1413 San Marco Ave

City

Coral Gables

State

FL

Zip Code

33134-2255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mount Sinai Medical Center

Occupation

Vice President, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282154

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Eric Peburn**

Mailing Address 7 Fairvinds Circle

City

Ormond Beach

State

FL

Zip Code

32176-2195

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Halifax Health Medical Center of Dayto

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282155

Amount of Each Receipt this Period

1250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Amy Perry**

Mailing Address 5133 North Bay Road

City

Miami Beach

State

FL

Zip Code

33140-2008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mount Sinai Medical Center

Occupation

Chief Operating Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282156

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mr. Joe Petrock**

Mailing Address 303 North Clyde Morris Boulevard

City

Daytona Beach

State

FL

Zip Code

32114-2709

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Halifax Health Medical Center of Dayto

Occupation

Director Community Relations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282158

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

**C. Mr. Daryl Tol**

Mailing Address 701 West Plymouth Avenue

City

Deland

State

FL

Zip Code

32720-3236

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Florida Hospital Memorial Medical Cent

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282166

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Ms. Charlene Welker**

Mailing Address 19101 Mystic Pointe Drive  
Suite 1006

City Aventura State FL Zip Code 33180-4512

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mount Sinai Medical Center

Occupation  
Sr. Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20282169**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Lewis C Addison**

Mailing Address 1920 Atherholt Road

City Lynchburg State VA Zip Code 24501-1104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Centra Lynchburg General Hospital

Occupation  
Senior Vice President and Chief Financ

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20282187**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

## **C. Dr. John R Audett MD**

Mailing Address 8110 Gatehouse Road

City Falls Church State VA Zip Code 22042-1210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Inova Health System

Occupation  
Chief Medical Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20282188**

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

950.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Thomas Auer**

Mailing Address 6001 Dominion Fairways Place

City State Zip Code  
 Glen Allen VA 23059-6918

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Bon Secours-Richmond Community Hospita

Occupation  
 Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20282189**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Mr. Charles Beard Jr**

Mailing Address 3096 Windsong Dr

City State Zip Code  
 Oakton VA 22124-1830

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Inova Mount Vernon Hospital

Occupation  
 Trustee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20282191**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**c. Ms. Peggy J. Braun**

Mailing Address 3116 Yeates Lane

City State Zip Code  
 Virginia Beach VA 23452-6117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Sentara Virginia Beach General Hospita

Occupation  
 Vice President, Nurse Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20282193**

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1050.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Robert Broermann**

Mailing Address 6015 Poplar Hall Drive

City

Norfolk

State

VA

Zip Code

23502-3819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

Senior Vice President and Chief Financ

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282194

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Mr. Stephen Cumbie**

Mailing Address 837 Mackall Drive

City

McLean

State

VA

Zip Code

22101-1615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Inova Health System

Occupation

Manager & Trustee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282195

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Mr. James D Dahling**

Mailing Address 601 Children's Lane

City

Norfolk

State

VA

Zip Code

23507-1910

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Children's Hospital of The King's Daug

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282196

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Marshall Doeller**

Mailing Address PO Box 1035

City

Warrenton

State

VA

Zip Code

20188-1035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fauquier Hospital

Occupation

Board Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282200

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Dr. Loring S Flint MD**

Mailing Address 1842 Fonthill Court

City

McLean

State

VA

Zip Code

22102-4792

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Inova Health System

Occupation

Executive Vice President/Chief Medical

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282201

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Mr. Richard L Haushalter**

Mailing Address 2010 Health Campus Drive

City

Harrisonburg

State

VA

Zip Code

22801-3293

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rockingham Memorial Hospital

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20282202

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. James Hilbert**

Mailing Address 1060 First Colonial Road

City State Zip Code  
 Virginia Beach VA 23454-3002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Virginia Beach General Hospita

Occupation

CFO/OPTIM Health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 09 2012

**Transaction ID : 20282203**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

## **B. Ms. Kay Hix**

Mailing Address 2784 Lakeview Road

City State Zip Code  
 Troutville VA 24175-2750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Carilion Clinic

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 09 2012

**Transaction ID : 20282204**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

## **C. Ms Karen Perdue**

Mailing Address 943 West 6th Avenue, Suite 120

City State Zip Code  
 Anchorage AK 99501-2033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Alaska State Hospital and Nursing Home

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 22 2012

**Transaction ID : 20282715**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1700.00

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Kurt Hofelich**

Mailing Address 705 Wild Cherry Court

City

Chesapeake

State

VA

Zip Code

23322-7734

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Norfolk General Hospital

Occupation

President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20283491

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Mr. Timothy S. Jennings**

Mailing Address 4715 White Owl Crescenty

City

Chesapeake

State

VA

Zip Code

23321

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Norfolk General Hospital

Occupation

Vice President Pharmacy

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20283492

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Ms. Betsey Meadows**

Mailing Address 425 Pleasant Point Drive

City

Norfolk

State

VA

Zip Code

23502-5703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20283494

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Dr. John Moynihan**

Mailing Address 1170 Huntover Ct.

City

McLean

State

VA

Zip Code

22102-2511

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Inova Health System

Occupation

Director of Surgery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20283495**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Mr Shane H Peng MD**

Mailing Address 9870 Breezy Pont Ln

City

Hayes

State

VA

Zip Code

23072-4019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

VP Sr Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20283519**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Mr. Laurens Sartoris**

Mailing Address P O Box 31394

City

Richmond

State

VA

Zip Code

23294-1394

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Virginia Hospital & Healthcare Associa

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20283522**

Amount of Each Receipt this Period

350.00

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1050.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

**A. Ms Rachel Schneider**

Mailing Address 2328 Santa Fe Drive

City

Virginia Beach

State

VA

Zip Code

23456-6752

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

Director of Network Relations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 09 / 2012

Transaction ID : 20283523

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Mr. Gerald Seager**

Mailing Address 7509 Mendota Place

City

Springfield

State

VA

Zip Code

22150-4123

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Inova Health System

Occupation

Chief Operating Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 09 / 2012

Transaction ID : 20283524

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Dr. Thomas B Thames MD**

Mailing Address 800 Independence Boulevard

City

Virginia Beach

State

VA

Zip Code

23455-6005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Princess Anne Hospital

Occupation

Vice President Medical Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 09 / 2012

Transaction ID : 20283561

Amount of Each Receipt this Period

350.00

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1050.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. H. Patrick Walters**

Mailing Address 8323 Private Line

City State Zip Code  
 Annandale VA 22304-1594

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Inova Health System

Occupation  
 Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 09 2012

**Transaction ID : 20283564**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Mr. Stephen M. Ahnen**

Mailing Address 125 Airport Road

City State Zip Code  
 Concord NH 03301-7300

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 New Hampshire Hospital Association

Occupation  
 President and CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 13 2012

**Transaction ID : 20288642**

Amount of Each Receipt this Period

90.90

Full Name (Last, First, Middle Initial)

**C. Ms. Paula Minnehan**

Mailing Address 283 Gallopiny Hill Road

City State Zip Code  
 Hopkinton NH 03229-3402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 New Hampshire Hospital Association

Occupation  
 V.P., Finance and Rural Hospitals

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 13 2012

**Transaction ID : 20288643**

Amount of Each Receipt this Period

32.00

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472.90

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Leslie K. Melby**

Mailing Address 375 Farrington Colner Road

City

Hopkinton

State

NH

Zip Code

03229-2021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New Hampshire Hospital Association

Occupation

Vice President, Government Relations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

256.00

Date of Receipt

08 / 13 / 2012

Transaction ID : 20288644

Amount of Each Receipt this Period

32.00

Full Name (Last, First, Middle Initial)

**B. Mr. Tim Blasl**

Mailing Address 1622 E. Interstate Avenue  
Suite B

City

Bismarck

State

ND

Zip Code

58503-0561

FEC ID number of contributing  
federal political committee.

C

Name of Employer

North Dakota Hospital Association

Occupation

Vice President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 17 / 2012

Transaction ID : 20288646

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Mr. Fredrik Andreasson**

Mailing Address 1120 Cherry Street  
Suite 300

City

Seattle

State

WA

Zip Code

98104-2028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cardon Outreach

Occupation

Executive Vice President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 13 / 2012

Transaction ID : 20288664

Amount of Each Receipt this Period

250.00

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632.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Chris Champ**

Mailing Address 3203 32nd Avenue, SW

City State Zip Code  
 Fargo ND 58103-6242

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eide Bailly, LLP

Occupation

Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 13 / 2012

**Transaction ID : 20288665**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. Mr Geoff Glueckstein**

Mailing Address 5500 Wayzata Blvd. Ste 300

City State Zip Code  
 Golden Valley MN 55416-3582

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JE Dunn Construction Services

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 13 / 2012

**Transaction ID : 20288672**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Perry Hanson**

Mailing Address 1660 S. Highway

City State Zip Code  
 Minneapolis MN 55416

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wipfli LLP

Occupation

Principal and Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 13 / 2012

**Transaction ID : 20288675**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Jennifer E. Mallard**

Mailing Address 1455 Pennsylvania Ave, NW  
Suite 400

City Washington State DC Zip Code 20004-1017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mayo Clinic

Occupation

Director Federal Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 13 / 2012

**Transaction ID : 20288681**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Ross Manson**

Mailing Address 4310 17th Ave

City Fargo State ND Zip Code 58103-3339

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eidie Bailly LLP

Occupation

Manager, Health Care Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 13 / 2012

**Transaction ID : 20288682**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Ms. Linda U Jordan**

Mailing Address P O Box 1270

City Ashland State AL Zip Code 36251-1270

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Clay County Hospital

Occupation

Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 22 / 2012

**Transaction ID : 20288719**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. John J. Dawidowski**

Mailing Address 17 Brookshire Drive

City Robbinsville State NJ Zip Code 08691-2554

FEC ID number of contributing federal political committee.

C

Name of Employer  
New Jersey Hospital Association

Occupation  
Vice President & General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.75

Date of Receipt

08 / 03 / 2012

Transaction ID : 20288737

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Mr. Neil Eicher**

Mailing Address 760 Alexander Road

City Princeton State NJ Zip Code 08540-6305

FEC ID number of contributing federal political committee.

C

Name of Employer  
New Jersey Hospital Association

Occupation  
Deputy Director, Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1575.00

Date of Receipt

08 / 03 / 2012

Transaction ID : 20288742

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Mr. Sean J. Hopkins**

Mailing Address 6180 Lower Mountain Road

City New Hope State PA Zip Code 18938-5760

FEC ID number of contributing federal political committee.

C

Name of Employer  
New Jersey Hospital Association

Occupation  
Sr. VP., Health Economics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1728.11

Date of Receipt

08 / 03 / 2012

Transaction ID : 20288745

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45.00

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. William D. Kennedy**

Mailing Address 1549 North Valley Road

City

Malvern

State

PA

Zip Code

19355-9796

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

Senior Vice President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1215.00

Date of Receipt

08 / 03 / 2012

Transaction ID : 20288747

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Mr. Randall J. Minniear**

Mailing Address 3901 Worthington Court

City

Freehold

State

NJ

Zip Code

7728

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

Senior VP, Government Relations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1590.00

Date of Receipt

08 / 03 / 2012

Transaction ID : 20288756

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Mr. Robert W Ladenburger**

Mailing Address 2420 West 26th Avenue, Suite 100-D

City

Denver

State

CO

Zip Code

80211-5302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sisters of Charity of Leavenworth Heal

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 13 / 2012

Transaction ID : 20288806

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

530.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Tom Nash**

Mailing Address 7335 East Orchard Road  
Suite 100

City State Zip Code  
Greenwood Village CO 80111-2582

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Colorado Hospital Association

Occupation

Vice President of Financial Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 13 / 2012

**Transaction ID : 20288810**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael T Baxter**

Mailing Address 400 West 16th Street

City State Zip Code  
Pueblo CO 81003-2781

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Parkview Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 13 / 2012

**Transaction ID : 20288813**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael Scott**

Mailing Address 7335 East Orchard Road  
Suite 100

City State Zip Code  
Greenwood Village CO 80111-2582

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Colorado Hospital Association

Occupation

Vice President, Shared Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 13 / 2012

**Transaction ID : 20288822**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

750.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Kurt Gensert RN, FACHE**

Mailing Address 1850 Egbert Street

City

Brighton

State

CO

Zip Code

80601-2404

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Platte Valley Medical Center

Occupation

Assistant Vice President, Nursing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 13 / 2012

Transaction ID : 20288824

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Gary Campbell**

Mailing Address 188 Inverness Drive West #500

City

Englewood

State

CO

Zip Code

80112-5204

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Centura Health

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 13 / 2012

Transaction ID : 20288825

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Mr John Suits**

Mailing Address P O Box 1326

City

Colorado Springs

State

CO

Zip Code

80901-1326

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Memorial Health System

Occupation

Director Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 13 / 2012

Transaction ID : 20288826

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Kenneth W Leisher**

Mailing Address P O Box 429

City State Zip Code  
 Salida CO 81201-0429

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Heart of the Rockies Regional Medical

Occupation  
 Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 13 / 2012

**Transaction ID : 20288827**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Kenneth Harman**

Mailing Address 345 Cleveland Street

City State Zip Code  
 Meeker CO 81641-3238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Pioneers Medical Center

Occupation  
 Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 13 / 2012

**Transaction ID : 20288828**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Ms. Melinda Clark**

Mailing Address 3600 Teakwood Dr

City State Zip Code  
 Springfield IL 62712-8785

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Hospital Sisters Health System

Occupation  
 President & Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20288831**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

750.00

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Timothy J Eckels**

Mailing Address 33 Oak Lane

City

Springfield

State

IL

Zip Code

62712-8611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hospital Sisters Health System

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20288834

Amount of Each Receipt this Period

800.00

Full Name (Last, First, Middle Initial)

**B. Mr. James P Evans ESQ**

Mailing Address 2400 North Rockton Avenue

City

Rockford

State

IL

Zip Code

61103-3655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rockford Memorial Hospital

Occupation

Vice President Legal Affairs and Gener

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20288835

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**c. Mr. Gary E. Kaatz**

Mailing Address 500 Gypsy Lane

City

Youngstown

State

OH

Zip Code

44504-1396

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Western Reserve Care System

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20288836

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2050.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Maureen A Kahn**

Mailing Address P O Box 7005

City  
Quincy

State  
IL

Zip Code  
62305-7005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blessing Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20288837

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Mr. Evert J Kuiper**

Mailing Address P O Box 340

City  
Alton

State  
IL

Zip Code  
62002-0340

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Saint Anthony's Health Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20288839

Amount of Each Receipt this Period

800.00

Full Name (Last, First, Middle Initial)

**c. Ms. Michele Lippert RN, MS**

Mailing Address 1754 Rowntree Ln

City  
Rockford

State  
IL

Zip Code  
61107-2759

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rockford Memorial Hospital

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20288841

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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1650.00

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. William Montgomery**

Mailing Address 1659 Ruth Place

City

Springfield

State

IL

Zip Code

62704-3361

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hospital Sisters Health System

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20288845**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Keith Allen Page**

Mailing Address 6800 State Route 162

City

Maryville

State

IL

Zip Code

62062-8500

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Anderson Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20288849**

Amount of Each Receipt this Period

800.00

Full Name (Last, First, Middle Initial)

**C. Mr. Daniel A Parod**

Mailing Address 2400 North Rockton Avenue

City

Rockford

State

IL

Zip Code

61103-3655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rockford Memorial Hospital

Occupation

Senior Vice President Administrative A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 20288850**

Amount of Each Receipt this Period

800.00

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**TOTAL** This Period (last page this line number only)..... ►

1850.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Kevin P Poorten**

Mailing Address P O Box 707

City  
Dekalb

State  
IL

Zip Code  
60115-0707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kish Health System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20288851

Amount of Each Receipt this Period

800.00

Full Name (Last, First, Middle Initial)

**B. Mr. Larry Ragel**

Mailing Address 800 East Carpenter Street

City  
Springfield

State  
IL

Zip Code  
62769-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. John's Hospital

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20288852

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Robert C Schmitt II**

Mailing Address P O Box 429

City  
Gibson City

State  
IL

Zip Code  
60936-0429

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gibson Area Hospital and Health Servic

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 09 / 2012

Transaction ID : 20288853

Amount of Each Receipt this Period

1000.00

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**TOTAL** This Period (last page this line number only)..... ►

2050.00

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Ms. Mary Starmann-Harrison FACHE**

Mailing Address P O Box 19456

City  
Springfield

State  
IL

Zip Code  
62794-9456

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hospital Sisters Health System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 09 / 2012

**Transaction ID : 2028854**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. Ms. Marilyn Schock**

Mailing Address 1801 16th Street

City  
Greeley

State  
CO

Zip Code  
80631-5154

FEC ID number of contributing  
federal political committee.

C

Name of Employer

McKee Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 17 / 2012

**Transaction ID : 2028951**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Mr. David Hamm**

Mailing Address 200 Exempla Circle

City  
Lafayette

State  
CO

Zip Code  
80026-3370

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Exempla Good Samaritan Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 17 / 2012

**Transaction ID : 20289582**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael Slubowski**

Mailing Address 2420 West 26th Avenue, Suite 100-D

City

Denver

State

CO

Zip Code

80211-5302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Exempla Healthcare, Inc.

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 17 / 2012

**Transaction ID : 20289676**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Gary L Brewer**

Mailing Address 1906 Blake Avenue

City

Glenwood Springs

State

CO

Zip Code

81601-4227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Valley View Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 17 / 2012

**Transaction ID : 20289681**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Mr. Bain J Farris**

Mailing Address 1835 Franklin Street

City

Denver

State

CO

Zip Code

80218-1126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Exempla Saint Joseph Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 17 / 2012

**Transaction ID : 20289696**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. John Gardner**

Mailing Address 1000 West 8th Avenue

City State Zip Code  
 Yuma CO 80759-2641

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Yuma District Hospital

Occupation  
 Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

08 / 17 / 2012

**Transaction ID : 20289710**

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

**B. Mr. James E Shmerling**

Mailing Address 13123 East 16th Avenue

City State Zip Code  
 Aurora CO 80045-7106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Children's Hospital Colorado

Occupation  
 President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 17 / 2012

**Transaction ID : 20289711**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Ms. Pamela A. Nicholson**

Mailing Address 5570 DTC Parkway

City State Zip Code  
 Greenwood Village CO 80111-3043

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Centura Health

Occupation  
 Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 17 / 2012

**Transaction ID : 20289719**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1125.00

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Frank May**

Mailing Address 1024 Central Park Drive

City State Zip Code  
Steamboat Springs CO 80487-5010

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Yampa Valley Medical Center Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 17 2012

**Transaction ID : 20289720**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. James V. Ferando**

Mailing Address P O Box 25489

City State Zip Code  
Phoenix AZ 85002-5489

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Banner Health - Western Region President Western Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 17 2012

**Transaction ID : 20289721**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Morre Dean**

Mailing Address 9395 Crown Crest Boulevard

City State Zip Code  
Parker CO 80138-8573

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Parker Adventist Hospital Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 17 2012

**Transaction ID : 20289722**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Robert A Dockter**

Mailing Address P O Box 517

City

Eureka

State

SD

Zip Code

57437-0517

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eureka Community Health Services Avera

Occupation

Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20290043**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. David Link**

Mailing Address 2218 East St. Charles Circle

City

Sioux Falls

State

SD

Zip Code

57103-5818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sanford Health

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20290058**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Daniel Gran**

Mailing Address P O Box 370

City

Freeman

State

SD

Zip Code

57029-0370

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Freeman Regional Health Services

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20290068**

Amount of Each Receipt this Period

375.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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875.00



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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Bernard H. Becker**

Mailing Address 4527 SW Crenshaw Dr.

City

Topeka

State

KS

Zip Code

66610-1615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Stormont-Vail HealthCare

Occupation

VP/Chief Human Resources Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 23 / 2012

Transaction ID : 20290855

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Kevin J. Han**

Mailing Address 6200 SW 34th Terr.

City

Topeka

State

KS

Zip Code

66614-4667

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Stormont-Vail HealthCare

Occupation

Director, Financial Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 23 / 2012

Transaction ID : 20290956

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Stephen F Wright**

Mailing Address 3330 Masonic Drive

City

Alexandria

State

LA

Zip Code

71301-3841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHRISTUS St. Frances Cabrini Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 20 / 2012

Transaction ID : 20292987

Amount of Each Receipt this Period

500.00

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1000.00

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Mark E Marley FACHE**

Mailing Address P O Box 2009

City

Natchitoches

State

LA

Zip Code

71457-2009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Natchitoches Regional Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 20 / 2012

Transaction ID : 20292990

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Dr. Mark J Peters MD**

Mailing Address 4200 Houma Boulevard

City

Metairie

State

LA

Zip Code

70006-2970

FEC ID number of contributing  
federal political committee.

C

Name of Employer

East Jefferson General Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 20 / 2012

Transaction ID : 20292991

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**c. Mr. Clifford M Broussard FACHE**

Mailing Address 2400 Hospital Drive

City

Bossier City

State

LA

Zip Code

71111-2385

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WK Bossier Health Center

Occupation

Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 20 / 2012

Transaction ID : 20292992

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Greg Frost**

Mailing Address 451 Florida St., Bank One Centre

City State Zip Code  
 Baton Rouge LA 70801-1700

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Breazeale Sachse & Wilson, LLP

Occupation  
 Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20292994**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Ms. Phyllis Peoples MSN, RN**

Mailing Address P O Box 6037

City State Zip Code  
 Houma LA 70361-6037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Terrebonne General Medical Center

Occupation  
 President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20294337**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Mr. William Adcock**

Mailing Address P O Box 398

City State Zip Code  
 Farmerville LA 71241-0398

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Union General Hospital

Occupation  
 Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20294339**

Amount of Each Receipt this Period

250.00

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**TOTAL** This Period (last page this line number only)..... ►

1250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Evalyn Ormond**

Mailing Address P O Box 398

City

Farmerville

State

LA

Zip Code

71241-0398

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Union General Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20294340**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Robert Wolterman**

Mailing Address 2700 Napoleon Avenue

City

New Orleans

State

LA

Zip Code

70115-6914

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ochsner Baptist Medical Center

Occupation

CEO - Community Hospital

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20294341**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**c. Ms. Cindy L. Dolan CPA**

Mailing Address P.O. Box 40318

City

Baton Rouge

State

LA

Zip Code

70816-8359

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HSLI

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20294343**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Glenn Landry**

Mailing Address P.O. Box 40318

City

Baton Rouge

State

LA

Zip Code

70835-0318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HSLI

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20297080**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Patrick E. Haggerty**

Mailing Address 2450 Severn Avenue  
#210

City

Metairie

State

LA

Zip Code

70001-1931

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lane Regional Medical Center

Occupation

Program Director, Behavioral Health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20297083**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Scott Wester**

Mailing Address 5000 Hennessy Boulevard

City

Baton Rouge

State

LA

Zip Code

70808-4375

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Our Lady of the Lake Regional Medical

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20297084**

Amount of Each Receipt this Period

250.00

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**TOTAL** This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Dolores LeJeune , RN, NE-B**

Mailing Address 1125 West Highway 30

City

Gonzales

State

LA

Zip Code

70737-5004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. Elizabeth Hospital

Occupation

President & Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20297085**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Mark Cullen**

Mailing Address 1632 N. Avenue D

City

Crowley

State

LA

Zip Code

70526-2826

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Grand Oaks Rehabilitation Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20297087**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Timothy O Coffey**

Mailing Address 1701 Oak Park Boulevard

City

Lake Charles

State

LA

Zip Code

70601-8911

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

Senior Vice President Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20298033**

Amount of Each Receipt this Period

225.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

725.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Todd Delahoussaye MBA**

Mailing Address 1701 Oak Park Boulevard

City

Lake Charles

State

LA

Zip Code

70601-8911

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

Sr. VP, Specialty & Physician Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 20 / 2012

Transaction ID : 20298034

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**B. Ms. Bernita Loyd , LD, LDN**

Mailing Address 1701 Oak Park Blvd

City

Lake Charles

State

LA

Zip Code

70601-8911

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

Vice President, Support Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 20 / 2012

Transaction ID : 20298035

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**c. Ms. Marilyn McSwain RNC, MSN**

Mailing Address 1900 West Gauthier Road

City

Lake Charles

State

LA

Zip Code

70605-7170

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital for Wom

Occupation

Chief Nursing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 20 / 2012

Transaction ID : 20298036

Amount of Each Receipt this Period

225.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

675.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Dr. Kevin Mocklin MD**

Mailing Address 1701 Oak Park Boulevard

City

Lake Charles

State

LA

Zip Code

70601-8911

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

Director Medical Staff

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 20 / 2012

Transaction ID : 20298037

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**B. Ms. Donna Shields**

Mailing Address 1701 Oak Park Boulevard

City

Lake Charles

State

LA

Zip Code

70601-8911

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

VP Patient Care

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 20 / 2012

Transaction ID : 20298041

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**c. Mr David Usher , FACHE**

Mailing Address P O Drawer 'M'

City

Lake Charles

State

LA

Zip Code

70602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

Senior Vice President, Business Develo

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 20 / 2012

Transaction ID : 20298042

Amount of Each Receipt this Period

225.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

675.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Charles P Whitson CPA**

Mailing Address 1701 Oak Park Boulevard

City

Lake Charles

State

LA

Zip Code

70601-8911

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

Senior Vice President Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20298043**

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**B. Ms. Marie E Knedler RN**

Mailing Address 17683 Lochland Ridge

City

Council Bluffs

State

IA

Zip Code

51503-4493

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Alegent Health-Mercy Hospital

Occupation

Vice President and Chief Operating Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20298071**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Mr. Steven P Baumert**

Mailing Address P O Box 2C

City

Council Bluffs

State

IA

Zip Code

51502-3002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Jennie Edmundson Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20298072**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1225.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Clinton J Christianson FACHE**

Mailing Address 1 St Joseph's Drive

City

Centerville

State

IA

Zip Code

52544-9017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mercy Medical Center-Centerville

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20298075**

Amount of Each Receipt this Period

312.50

Full Name (Last, First, Middle Initial)

**B. Mr. Troy Martens**

Mailing Address 802 Kenyon Road

City

Fort Dodge

State

IA

Zip Code

50501-5740

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Trinity Regional Medical Center

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20298083**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Ms. Susan Thompson**

Mailing Address 1500 Collins St.

City

Webster City

State

IA

Zip Code

50595-2621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Trinity Regional Medical Center

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20298084**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

812.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. John C Sheehan FACHE**

Mailing Address P O Box 3026

City

Cedar Rapids

State

IA

Zip Code

52406-3026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. Luke's Hospital

Occupation

Executive Vice President and Chief Ope

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20298085**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mr. Jack Dusenbery**

Mailing Address 3421 West Ninth Street

City

Waterloo

State

IA

Zip Code

50702-5499

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Covenant Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20298091**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**c. Mr. Stephen A Estes**

Mailing Address P O Box 1310

City

Mount Vernon

State

KY

Zip Code

40456-1310

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rockcastle Regional Hospital and Respi

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 27 / 2012

**Transaction ID : 20298101**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1250.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Larry Gray

Mailing Address 1740 Nicholasville Road

City Lexington State KY Zip Code 40503-1499

FEC ID number of contributing federal political committee.

C

Name of Employer

Baptist Regional Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 27 / 2012

Transaction ID : 20298102

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ms. Vicki A Darnell

Mailing Address 217 South Third Street

City Danville State KY Zip Code 40422-1823

FEC ID number of contributing federal political committee.

C

Name of Employer

Ephraim McDowell Regional Medical Cent

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 27 / 2012

Transaction ID : 20298105

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Mr. Stephen M. Johnson

Mailing Address PO Box 20007

City Owensboro State KY Zip Code 42304-0007

FEC ID number of contributing federal political committee.

C

Name of Employer

Owensboro Medical Health System

Occupation

Dir. Government & Community Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 27 / 2012

Transaction ID : 20298106

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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1250.00

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Carl G Herde**

Mailing Address 4007 Kresge Way

City State Zip Code  
Louisville KY 40207-4677

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Baptist Healthcare System

Occupation  
Vice President and Chief Financial Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
08 / 27 / 2012

**Transaction ID : 20298107**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mr. Andy Sears**

Mailing Address 8511 Brookside Drive West

City State Zip Code  
Pewee Valley KY 40056-9122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Baptist Healthcare System

Occupation  
VP, Planning & System Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
08 / 27 / 2012

**Transaction ID : 20298142**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Mr. Tommy J Smith**

Mailing Address 4007 Kresge Way

City State Zip Code  
Louisville KY 40207-4677

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Baptist Healthcare System

Occupation  
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
08 / 27 / 2012

**Transaction ID : 20298143**

Amount of Each Receipt this Period

500.00

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1300.00

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mrs. Susan Stout Tamme , FACHE**

Mailing Address 4000 Kresge Way

City State Zip Code  
Louisville KY 40207-4605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Baptist Hospital East

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 27 / 2012

Transaction ID : 20298144

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Dr. Jeffrey B Barber MBA, DrPH,**

Mailing Address P O Box 20007

City State Zip Code  
Owensboro KY 42304-0007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Owensboro Medical Health System

Occupation  
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 27 / 2012

Transaction ID : 20298146

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Jack G. Blackwell**

Mailing Address 2201 Forest Ave

City State Zip Code  
Ashland KY 41101-3728

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Highlands Regional Medical Center

Occupation  
Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 27 / 2012

Transaction ID : 20298150

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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1250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Harold C Warman Jr FACHE**

Mailing Address P O Box 668

City

Prestonsburg

State

KY

Zip Code

41653-0668

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Highlands Regional Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 27 / 2012

Transaction ID : 20298155

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Ms. Renee K Jensen**

Mailing Address 322 South Birch Street

City

McCleary

State

WA

Zip Code

98557-9522

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mark Reed Health Care District

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 27 / 2012

Transaction ID : 20298165

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Ms. Andrea Nenzel**

Mailing Address 14432 SE Eastgate Way

City

Bellevue

State

WA

Zip Code

98007-6493

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PeaceHealth

Occupation

Board Chair

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 27 / 2012

Transaction ID : 20298166

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. C Scott Bond**

Mailing Address 300 Elliott Avenue West, Suite 300

City  
Seattle

State  
WA

Zip Code  
98119-4122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Washington State Hospital Association

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 27 / 2012

**Transaction ID : 20298167**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Ms. Elaine Couture BSN, MBA,**

Mailing Address P O Box 2555

City  
Spokane

State  
WA

Zip Code  
99220-2555

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Providence Sacred Heart Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 27 / 2012

**Transaction ID : 20298168**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**c. Mr. Harold S Geller**

Mailing Address 315 North 14th Avenue

City  
Othello

State  
WA

Zip Code  
99344-1254

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Othello Community Hospital

Occupation

Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 27 / 2012

**Transaction ID : 20298169**

Amount of Each Receipt this Period

500.00

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1500.00



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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Dr. Rod Hochman M.D.**

Mailing Address 1801 Lind Avenue SW  
#9016

City Renton State WA Zip Code 98057-3368

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Providence Health & Services

Occupation

Group President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 27 / 2012

**Transaction ID : 20298170**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mr. Tom Jensen**

Mailing Address 915 Anderson Drive

City Aberdeen State WA Zip Code 98520-1006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Grays Harbor Community Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 27 / 2012

**Transaction ID : 20298171**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Dr. Cliff Robertson MD**

Mailing Address 1145 Broadway Place  
Suite 1200

City Tacoma State WA Zip Code 98402-3524

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Franciscan Health System

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 27 / 2012

**Transaction ID : 20298172**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Joseph M Kortum**

Mailing Address 400 NE Mother Joseph Place

City

Vancouver

State

WA

Zip Code

98664-3200

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PeaceHealth Southwest Medical Center

Occupation

President and Chief Mission Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

08 / 27 / 2012

**Transaction ID : 20298173**

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

**B. Ms. Sarah Patterson**

Mailing Address P O Box 900

City

Seattle

State

WA

Zip Code

98111-0900

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Virginia Mason Medical Center

Occupation

Executive Vice President & Chief Opera

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

08 / 27 / 2012

**Transaction ID : 20298174**

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

**C. Mr. Donald Faulk Jr FACHE**

Mailing Address 300 Lokchapee Drive

City

Macon

State

GA

Zip Code

31210-4209

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medical Center of Central Georgia

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : 20322368**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Joseph D Lavelle**

Mailing Address 109 Howard Oaks Drive

City

Macon

State

GA

Zip Code

31210-7316

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medical Center of Central Georgia

Occupation

Executive Vice President and COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 20 / 2012

Transaction ID : 20322379

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Ms. Judy C. Paul APRN, BC,**

Mailing Address 3186 Vista Circle

City

Macon

State

GA

Zip Code

31204-1960

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medical Center of Central Georgia

Occupation

VP, Patient Care Services/CNO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 20 / 2012

Transaction ID : 20322389

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Joe L Kirk**

Mailing Address 1910 East 34th Street

City

Joplin

State

MO

Zip Code

64804-4215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Freeman Health System

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 14 / 2012

Transaction ID : 20322427

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Debra M. Koelkebeck**

Mailing Address 738 County Road 130

City

Diamond

State

MO

Zip Code

64840-6136

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Freeman Health System

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 14 / 2012

Transaction ID : 20322428

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Bradley Beard**

Mailing Address 6401 France Avenue South

City

Edina

State

MN

Zip Code

55435-2104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fairview Southdale Hospital

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

08 / 14 / 2012

Transaction ID : 20322458

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Mr. Brian Buchholz**

Mailing Address 14540 15th St. S

City

Afton

State

MN

Zip Code

55001-9310

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BWBR Architects

Occupation

Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

08 / 14 / 2012

Transaction ID : 20322459

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

310.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Bill Fenske**

Mailing Address 301 S. Oak Avenue SW

City  
Willamar

State Zip Code  
MN 56201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rice Memorial Hospital

Occupation  
Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.50

Date of Receipt

08 / 14 / 2012

Transaction ID : 20322462

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Mr Geoff Glueckstein**

Mailing Address 5500 Wayzata Blvd. Ste 300

City  
Golden Valley

State Zip Code  
MN 55416-3582

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JE Dunn Construction Services

Occupation  
Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

08 / 14 / 2012

Transaction ID : 20322463

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**c. Dr. Alan L Goldbloom M.D.**

Mailing Address 2525 Chicago Avenue South

City  
Minneapolis

State Zip Code  
MN 55404-4518

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Children's Hospitals and Clinics of Mi

Occupation  
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

08 / 14 / 2012

Transaction ID : 20322464

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Benjamin Koppelman**

Mailing Address 600 Pleasant Avenue

City

Park Rapids

State

MN

Zip Code

56470-1431

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. Joseph's Area Health Services

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

08 / 14 / 2012

Transaction ID : 20322480

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Mr. Lawrence J Massa**

Mailing Address 2550 University Avenue West, Suite

City

Saint Paul

State

MN

Zip Code

55114-1907

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Minnesota Hospital Association

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

08 / 14 / 2012

Transaction ID : 20322482

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Mr. Ben Peltier**

Mailing Address 2550 University Avenue W.  
Suite 350-S

City

Saint Paul

State

MN

Zip Code

55114-1907

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Minnesota Hospital Association

Occupation

Vice President, Legal Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.51

Date of Receipt

08 / 14 / 2012

Transaction ID : 20322485

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Dr. Terence Pladson MD**

Mailing Address 1406 Sixth Avenue North

City

Saint Cloud

State

MN

Zip Code

56303-1900

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CentraCare Health System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

08 / 14 / 2012

Transaction ID : 20322486

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Mr. Joe Schindler**

Mailing Address 2550 University Avenue W.  
Suite 350-S

City

Saint Paul

State

MN

Zip Code

55114-1052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Minnesota Hospital Association

Occupation

Vice President, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.99

Date of Receipt

08 / 14 / 2012

Transaction ID : 20322489

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Mr. Peter Smith**

Mailing Address 380 St. Peter St.  
Ste. 600

City

Saint Paul

State

MN

Zip Code

55102-1313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BWBR Architects

Occupation

Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

08 / 14 / 2012

Transaction ID : 20322491

Amount of Each Receipt this Period

20.00

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80.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Jason Bezozo**

Mailing Address P O Box 25489

City

Phoenix

State

AZ

Zip Code

85002-5489

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Banner Health

Occupation

System Director Government Relations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 30 / 2012

**Transaction ID : 20322494**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mr. James P Ulrich Jr.**

Mailing Address 2117 Blake Dr

City

McCook

State

NE

Zip Code

69001-1328

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Community Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 10 / 2012

**Transaction ID : 20322545**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**c. Mr. Stephen L Goeser FACHE**

Mailing Address 17703 Jones St

City

Omaha

State

NE

Zip Code

68118-3525

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Nebraska Methodist Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 27 / 2012

**Transaction ID : 20322566**

Amount of Each Receipt this Period

250.00

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1000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Daniel P. McElligott FACHE**

Mailing Address P O Box 9804

City

Grand Island

State

NE

Zip Code

68802-9804

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Saint Francis Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 27 / 2012

**Transaction ID : 20322798**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Ms. Kimberly A Russel**

Mailing Address 4031 Thorn Ct

City

Lincoln

State

NE

Zip Code

68520-9321

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BryanLGH Health System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 27 / 2012

**Transaction ID : 20322809**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael H. Schnieders**

Mailing Address P.O. Box 817

City

Kearney

State

NE

Zip Code

68848-0817

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Good Samaritan Hospital

Occupation

President/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 27 / 2012

**Transaction ID : 20322810**

Amount of Each Receipt this Period

250.00

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**TOTAL** This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Matthew J Perry**

Mailing Address 1771 Longhill Drive

City

Zanesville

State

OH

Zip Code

43701-7239

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Genesis HealthCare System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

08 / 24 / 2012

**Transaction ID : 20322816**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Mr. Thomas Duncan**

Mailing Address 10267 Cherry Tree Terrace

City

Dayton

State

OH

Zip Code

45458-9431

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Good Samaritan Hospital

Occupation

Vice President and Chief Financial Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 24 / 2012

**Transaction ID : 20322821**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Mr. Mark Shaker**

Mailing Address 423 Glendora Avenue

City

Dayton

State

OH

Zip Code

45409-2204

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Good Samaritan Hospital

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

08 / 24 / 2012

**Transaction ID : 20322881**

Amount of Each Receipt this Period

375.00

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2375.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms Barbara Johnson**

Mailing Address 1697 Big Bear Dr

City

Washington Twp

State

OH

Zip Code

45458-3692

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Miami Valley Hospital

Occupation

Executive Vice President/COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 24 / 2012

**Transaction ID : 20323014**

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

**B. Francis Albarano**

Mailing Address 1322 Quail Ridge

City

Richmond

State

IN

Zip Code

47374-7176

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. Vincent Randolph Hospital

Occupation

Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 16 / 2012

**Transaction ID : 20323035**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Mr. Robert A. Bates**

Mailing Address 3425 E. 106th Street

City

Carmel

State

IN

Zip Code

46033-3801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. Vincent Carmel Hospital

Occupation

CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 16 / 2012

**Transaction ID : 20323040**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Michael Browning**

Mailing Address 12110 Hawkins Way

City State Zip Code  
Fort Wayne IN 46814-9157

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Parkview Health

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 16 / 2012

Transaction ID : 20323044

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Greg Losasso**

Mailing Address 21683 Coulteri Court

City State Zip Code  
Bristol IN 46507-9691

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Elkhart General Healthcare System

Occupation

Hospital President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 16 / 2012

Transaction ID : 20323072

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Mike Schroyer**

Mailing Address 9065 Pebblepointe Circle

City State Zip Code  
Zionsville IN 46077-8992

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. Vincent Heart Center of Indiana

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

08 / 16 / 2012

Transaction ID : 20323083

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

625.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. John Stewart**

Mailing Address 1535 N. Park Ave.

City  
Indianapolis

State  
IN

Zip Code  
46202-2608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
St. Vincent Heart Center of Indiana

Occupation  
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 16 / 2012

**Transaction ID : 20323090**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mr. Thomas J VanOsdol**

Mailing Address 13772 Wyandotte Place

City  
Fishers

State  
IN

Zip Code  
46038-4500

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Saint John's Health System

Occupation  
Hospital President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 16 / 2012

**Transaction ID : 20323094**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Mr. Stephen M. Ahnen**

Mailing Address 125 Airport Road

City  
Concord

State  
NH

Zip Code  
03301-7300

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New Hampshire Hospital Association

Occupation  
President and CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

772.65

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 28 / 2012

**Transaction ID : 20323109**

Amount of Each Receipt this Period

45.45

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

570.45

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Paula Minnehan**

Mailing Address 283 Gallopiny Hill Road

City

Hopkinton

State

NH

Zip Code

03229-3402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New Hampshire Hospital Association

Occupation

V.P., Finance and Rural Hospitals

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

272.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	28	/	2012

**Transaction ID : 20323110**

Amount of Each Receipt this Period

16.00

Full Name (Last, First, Middle Initial)

**B. Ms. Leslie K. Melby**

Mailing Address 375 Farrington Colner Road

City

Hopkinton

State

NH

Zip Code

03229-2021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New Hampshire Hospital Association

Occupation

Vice President, Government Relations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

272.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	28	/	2012

**Transaction ID : 20323111**

Amount of Each Receipt this Period

16.00

Full Name (Last, First, Middle Initial)

**C. Mr. David P. Cogan**

Mailing Address 16211 Fernway Road

City

Shaker Heights

State

OH

Zip Code

44120-3363

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University Hospitals

Occupation

Senior Medical Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	24	/	2012

**Transaction ID : 20323112**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

282.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Dr. Fred C Rothstein MD**

Mailing Address 1080 W. Hill Drive

City

Gates Mills

State

OH

Zip Code

44040-9627

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University Hospitals Case Medical Cent

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 24 / 2012

Transaction ID : 20323114

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael Szubski**

Mailing Address 2375 Springside Oval

City

Brecksville

State

OH

Zip Code

44141-3358

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University Hospitals

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 24 / 2012

Transaction ID : 20323115

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Mr. Paul Tait**

Mailing Address 6560 Thorntree Drive

City

Brecksville

State

OH

Zip Code

44141-1769

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University Hospitals

Occupation

Sr VP, Strategic Planning & Bus Develo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 24 / 2012

Transaction ID : 20323116

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Jane Dus**

Mailing Address 21872 Eaton Rd

City State Zip Code  
 Fairview Park OH 44126-2312

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 University Hospitals Case Medical Cent Vice President, Medical/Surgical Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 24 2012

**Transaction ID : 20323117**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Ron Dzedzicki**

Mailing Address 11100 Euclid Avenue

City State Zip Code  
 Cleveland OH 44106-1716

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 University Hospitals Case Medical Cent Chief Support Services Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 24 2012

**Transaction ID : 20323118**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Ms. Robin Rowell-Leinweber**

Mailing Address 4337 Parklawn Drive

City State Zip Code  
 Willoughby OH 44094-7936

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 University Hospitals Case Medical Cent Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 24 2012

**Transaction ID : 20323119**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. C James Platt**

Mailing Address P O Box 174

City

Fort Madison

State

IA

Zip Code

52627-0174

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fort Madison Community Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 28 / 2012

**Transaction ID : 20323120**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mr. Mark D Richardson FACHE**

Mailing Address 1221 South Gear Avenue

City

West Burlington

State

IA

Zip Code

52655-1681

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Great River Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 28 / 2012

**Transaction ID : 20323122**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Ms. Pamela K Delagardelle**

Mailing Address 201 East 'J' Avenue

City

Grundy Center

State

IA

Zip Code

50638-2028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Grundy County Memorial Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 28 / 2012

**Transaction ID : 20323123**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael Louge**

Mailing Address 1995 Sherborne Lane

City

Powell

State

OH

Zip Code

43065-8555

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OhioHealth

Occupation

Senior Vice President and Chief Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 24 / 2012

**Transaction ID : 20323128**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mr. Timothy L Charles**

Mailing Address 701 Tenth Street SE

City

Cedar Rapids

State

IA

Zip Code

52403-1251

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mercy Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 28 / 2012

**Transaction ID : 20323133**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Ms. Mari Kaptain-Dahlen**

Mailing Address P O Box 3168

City

Sioux City

State

IA

Zip Code

51102-3168

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mercy Medical Center-Sioux City

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 28 / 2012

**Transaction ID : 20323134**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Sandra McIntosh RN, BSN, M**

Mailing Address 1208 Woodland Dr

City

Cedar Rapids

State

IA

Zip Code

52403-9076

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St Luke's Hospital

Occupation

Dir, Emergency, Trauma Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 28 / 2012

Transaction ID : 20323136

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Todd C Linden**

Mailing Address 210 Fourth Avenue

City

Grinnell

State

IA

Zip Code

50112-1886

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Grinnell Regional Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 28 / 2012

Transaction ID : 20323137

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Bruce McGrath**

Mailing Address 701 Tenth Street SE

City

Cedar Rapids

State

IA

Zip Code

52403-1251

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mercy Medical Center

Occupation

Trustee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 28 / 2012

Transaction ID : 20323139

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Philip Peterson**

Mailing Address 701 Tenth Street SE

City

Cedar Rapids

State

IA

Zip Code

52403-1292

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mercy Medical Center

Occupation

Executive Vice President and Chief Fin

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

08 / 28 / 2012

Transaction ID : 20323140

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Yousuf Ahmad**

Mailing Address 912 Appleblossom Drive

City

Villa Hills

State

KY

Zip Code

41017-3817

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mercy Hospital Mount Airy

Occupation

Divisional Senior Vice President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 24 / 2012

Transaction ID : 20323143

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Donald Rohling**

Mailing Address 1533 Oak Knoll Drive

City

Cincinnati

State

OH

Zip Code

45224-1061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mercy Hospital Anderson

Occupation

Senior Vice President Mission Integrat

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 24 / 2012

Transaction ID : 20323145

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

875.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Steve Holman**

Mailing Address 123 Bares Creek Ct.

City

Loveland

State

OH

Zip Code

45140-2502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Jewish Hospital, The

Occupation

President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 24 / 2012

**Transaction ID : 20323146**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Ms. Bobbie Gerhart**

Mailing Address 780 Reed Road

City

Springboro

State

OH

Zip Code

45066-9115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Miami Valley Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

08 / 24 / 2012

**Transaction ID : 20323151**

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

**C. Mr. David Adams**

Mailing Address 1045 Ashland Place

City

Lynchburg

State

VA

Zip Code

24503-2533

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Centra Lynchburg General Hospital

Occupation

Senior Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 16 / 2012

**Transaction ID : 20323161**

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

975.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Briggs W Andrews**

Mailing Address P O Box 13727

City

Roanoke

State

VA

Zip Code

24036-3727

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Carilion Clinic

Occupation

Senior Vice President Legal Services a

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 16 / 2012

**Transaction ID : 20323163**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Mr. John Degruittola**

Mailing Address 953 Winthrop Drive

City

Virginia Beach

State

VA

Zip Code

23452-3936

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

SVP, Sales and Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 16 / 2012

**Transaction ID : 20323164**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael Dudley**

Mailing Address 708 Fordsmere Ct

City

Chesapeake

State

VA

Zip Code

23322-2123

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 16 / 2012

**Transaction ID : 20323165**

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. John M. Dawes**

Mailing Address 1505 West 3rd Street

City

Sedalia

State

MO

Zip Code

65301-3604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bothwell Regional Health Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

08 / 29 / 2012

**Transaction ID : 20323166**

Amount of Each Receipt this Period

230.00

Full Name (Last, First, Middle Initial)

**B. Ms. Myra L Evans**

Mailing Address 16603 R Avenue

City

Tarkio

State

MO

Zip Code

64491-9280

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Community Hospital-Fairfax

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

08 / 29 / 2012

**Transaction ID : 20323170**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Mr. David L Archer**

Mailing Address P O Box 171808

City

Memphis

State

TN

Zip Code

38187-1808

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Saint Francis Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 30 / 2012

**Transaction ID : 20323182**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1355.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Ms. Beth Berry**

Mailing Address 500 Interstate Boulevard South

City

Nashville

State

TN

Zip Code

37210-4634

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tennessee Hospital Association

Occupation

Sr. Vice President, Government Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 30 / 2012

Transaction ID : 20323183

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Chris Clarke**

Mailing Address 500 Interstate Blvd. South

City

Nashville

State

TN

Zip Code

37210-4634

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tennessee Hospital Association

Occupation

Senior Vice President, Center for Pati

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 30 / 2012

Transaction ID : 20323184

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **c. Dr. Reginald W Coopwood MD**

Mailing Address 877 Jefferson Avenue

City

Memphis

State

TN

Zip Code

38103-2807

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Regional Medical Center at Memphis

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 30 / 2012

Transaction ID : 20323185

Amount of Each Receipt this Period

750.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Michael Huggins**

Mailing Address 500 Interstate Boulevard South

City State Zip Code  
Nashville TN 37210-4634

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tennessee Hospital Association

Occupation  
Senior Executive Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 30 / 2012

**Transaction ID : 20323186**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Bill Jolley**

Mailing Address 500 Interstate Blvd., South

City State Zip Code  
Nashville TN 37210-4634

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tennessee Hospital Association

Occupation  
Vice-President-Rural Health Issues

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 30 / 2012

**Transaction ID : 20323187**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Jason Little**

Mailing Address 350 North Humphreys Boulevard

City State Zip Code  
Memphis TN 38120-2177

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Baptist Memorial Health Care Corporati

Occupation  
Executive Vice President and Chief Ope

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

08 / 30 / 2012

**Transaction ID : 20323188**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Ronald A. Loving**

Mailing Address 3177 Forest Shadows Drive

City State Zip Code  
 Chattanooga TN 37421-2863

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Erlanger Medical Center

Occupation  
 Trustee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 30 / 2012

**Transaction ID : 20323189**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Mr. Scott Raynes**

Mailing Address 100 North Crest Drive

City State Zip Code  
 Springfield TN 37172-3927

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Northcrest Medical Center

Occupation  
 President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 30 / 2012

**Transaction ID : 20323190**

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

**C. Ms. Patty White**

Mailing Address 475 South Dobson Road

City State Zip Code  
 Chandler AZ 85224-5605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Chandler Regional Medical Center

Occupation  
 President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 31 / 2012

**Transaction ID : 20323192**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1600.00

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. John L Fitzgerald**

Mailing Address 3433 Fawn Wood Lane

City State Zip Code  
 Fairfax VA 22033-1640

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Inova Fair Oaks Hospital

Occupation  
 Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 16 / 2012

**Transaction ID : 20323194**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Ms. Patti Jurkus**

Mailing Address 207 Springhill Circle

City State Zip Code  
 Bedford VA 24523-5458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Bedford Memorial Hospital

Occupation  
 President & Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 16 / 2012

**Transaction ID : 20323197**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Mr. Richard Magenheimer**

Mailing Address 8110 Gatehouse Road

City State Zip Code  
 Falls Church VA 22042-1210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Inova Health System

Occupation  
 Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 16 / 2012

**Transaction ID : 20323200**

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

**SCHEDULE A (FEC Form 3X)**  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Genemarie P McGee**

Mailing Address 3728 Ballahack Road

City

Chesapeake

State

VA

Zip Code

23322-3201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Leigh Hospital

Occupation

Vice President

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : 20323201**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Mr. Scott A Miller**

Mailing Address 1521 Sea Breeze Tr

City

Virginia Beach

State

VA

Zip Code

23452-4742

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

Vice President Medical Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : 20323202**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Mr Dean Morehouse**

Mailing Address 8800 Pennsylvania Ave

City

Upper Marlboro

State

MD

Zip Code

20772-7312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Inova Health System

Occupation

Trustee

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : 20323203**

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1050.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Dr. Stephen A. Morgan MD**

Mailing Address 2581 Inglewood Road

City

Roanoke

State

VA

Zip Code

24015-4442

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Carilion Clinic

Occupation

Chief Medical Information Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 16 / 2012

**Transaction ID : 20323204**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Dr. John Niederhuber MD**

Mailing Address 7905 Sandalfoot Drive

City

Potomac

State

MD

Zip Code

20854-5449

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Inova Health System

Occupation

CEO, Inova Translational Medicine Inst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 16 / 2012

**Transaction ID : 20323205**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**c. Ms. Evelyn Olenick MSN, RN, C**

Mailing Address 1546 Winthrop Drive

City

Newport News

State

VA

Zip Code

23602-9629

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

Vice President Patient Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 16 / 2012

**Transaction ID : 20323206**

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Robert Tsien**

Mailing Address 1100 Carter Cooper Way

City State Zip Code  
Oakton VA 22124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Inova Health System

Occupation  
Trustee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 16 / 2012

**Transaction ID : 20323207**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Mr. Andrew P. Weddle**

Mailing Address 2708 Sandy Valley Road

City State Zip Code  
Virginia Beach VA 23452-7751

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sentara Princess Anne Hospital

Occupation  
Vice President, Revenue Cycle

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 16 / 2012

**Transaction ID : 20323208**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael K Powers FACHE**

Mailing Address 1650 Cowles Street

City State Zip Code  
Fairbanks AK 99701-5998

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fairbanks Memorial Hospital

Occupation  
Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 31 / 2012

**Transaction ID : 20323309**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Jennifer Burrows**

Mailing Address 4805 Glencore Way

City State Zip Code  
Williamsburg VA 23188-5701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sentara Williamsburg Regional Medical

Occupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 28 / 2012

**Transaction ID : 20324536**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Mr. Christopher Chiantella**

Mailing Address 206 Browns Meadow Ct

City State Zip Code  
Leesburg VA 20176-2328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Inova Loudoun Hospital

Occupation  
Chief Medical Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 28 / 2012

**Transaction ID : 20324538**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Mr. Paul Chidster**

Mailing Address 1468 Five Hill Trail

City State Zip Code  
Virginia Beach VA 23452-4745

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sentara Norfolk General Hospital

Occupation  
Vice President, Medical Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 28 / 2012

**Transaction ID : 20324539**

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Ramon Darcey**

Mailing Address 535 Independence Parkway  
Suite 200

City State Zip Code  
Chesapeake VA 23320-5176

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 28 / 2012

**Transaction ID : 20324540**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Mr. Leo DeLeon**

Mailing Address 1060 First Colonial Road

City State Zip Code  
Virginia Beach VA 23454-3002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Virginia Beach General Hospita

Occupation

Vice President Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 28 / 2012

**Transaction ID : 20324541**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Mr. Robert L Graves**

Mailing Address 100 Sentara Circle

City State Zip Code  
Williamsburg VA 23188-5713

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Williamsburg Regional Medical

Occupation

Vice President and Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 28 / 2012

**Transaction ID : 20324565**

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

900.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Dr. George Heuser MD**

Mailing Address 1744 Jack Frost Road

City

Virginia Beach

State

VA

Zip Code

23455-3221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

Vice President/ SR Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 28 / 2012

Transaction ID : 20324566

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

## **B. Mr. William D Jacobsen**

Mailing Address 180 Floyd Avenue

City

Rocky Mount

State

VA

Zip Code

24151-1318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Carilion Franklin Memorial Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 28 / 2012

Transaction ID : 20324567

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Michael K Kerner**

Mailing Address 150 Kingsley Lane

City

Norfolk

State

VA

Zip Code

23505-4602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bon Secours-DePaul Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 28 / 2012

Transaction ID : 20324583

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

900.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Ms. Elizabeth Long**

Mailing Address 7723 Stuart Hall Road

City State Zip Code  
Richmond VA 23229-6615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Virginia Hospital & Healthcare Associa

Occupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 28 2012

**Transaction ID : 20324584**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Michael Malone**

Mailing Address 11405 Havernen Road

City State Zip Code  
Fairfax Station VA 22039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Virginia Hospital Center - Arlington

Occupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 28 2012

**Transaction ID : 20324585**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Anthony Nader**

Mailing Address 13311 Ivakota Farm Rd

City State Zip Code  
Clifton VA 20124-1542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Inova Health System

Occupation  
Trustee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 28 2012

**Transaction ID : 20324586**

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Bert Reese**

Mailing Address 1513 Quail Point Road

City State Zip Code  
 Virginia Beach VA 23454-3115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

VP & Chief Information Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : 20324588**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

## **B. Ms. Judie S. Snipes**

Mailing Address 77 Gloucester Court

City State Zip Code  
 Troutville VA 24175-6625

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Carilion Clinic

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : 20324589**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

## **C. Ms. Sharon M. Bass Jr.**

Mailing Address 2619 Blue Hernon Circle

City State Zip Code  
 Roanoke VA 24018-5133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Carilion Clinic

Occupation

Vice President Imaging & Pharmacy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : 20324595**

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. William Blanton**

Mailing Address 4309 Blackthorne Ct

City

Virginia Beach

State

VA

Zip Code

23455-4549

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

VP for Underwriting & Actuarial Serv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 31 / 2012

**Transaction ID : 20324596**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Mr. Joseph Ingold**

Mailing Address 17613 Underwood Ct

City

Rockville

State

VA

Zip Code

23146-1652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bon Secours Health System, Inc.

Occupation

Vice President Integration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 31 / 2012

**Transaction ID : 20324598**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Mr. Jeff King**

Mailing Address 925 Ditchley Rd

City

Virginia Beach

State

VA

Zip Code

23451-3740

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 31 / 2012

**Transaction ID : 20324606**

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Ms. Melina Dee Perdue**

Mailing Address 101 Elm Avenue SE

City

Roanoke

State

VA

Zip Code

24013-2222

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Carilion Clinic

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 31 / 2012

**Transaction ID : 20324607**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

## **B. Ms. Megan R Perry**

Mailing Address 2300 Opitz Boulevard

City

Woodbridge

State

VA

Zip Code

22191-3311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sentara Northern Virginia Medical Cent

Occupation

Vice President and Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 31 / 2012

**Transaction ID : 20324608**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Xavier Richardson**

Mailing Address 8121 Lee Jackson Circle

City

Spotsylvania

State

VA

Zip Code

22553-3819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mary Washington Healthcare

Occupation

Executive Vice President Corporate Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 31 / 2012

**Transaction ID : 20324609**

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Elizabeth Savage-Tracy**

Mailing Address 340 Whispering Knolls Dr.

City

Winchester

State

VA

Zip Code

22603-2611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Valley Health System

Occupation

Vice President, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 31 / 2012

**Transaction ID : 20324610**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Mr. Nathan Bosk**

Mailing Address 8 Averstone Road

City

Holland

State

PA

Zip Code

18966-2676

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Health

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 17 / 2012

**Transaction ID : 20324638**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Mr. J. Scott Clemmensen**

Mailing Address 140 Chilton Road

City

Langhorne

State

PA

Zip Code

19047-8115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Health

Occupation

Vice President Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 17 / 2012

**Transaction ID : 20324644**

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

950.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Gregory D'Adamo**

Mailing Address 33 Brookwood Road

City

Mount Laurel

State

NJ

Zip Code

08054-4714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Health

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 17 / 2012

Transaction ID : 20324647

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Mr. John J. Dawidowski**

Mailing Address 17 Brookshire Drive

City

Robbinsville

State

NJ

Zip Code

08691-2554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

Vice President & General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1226.25

Date of Receipt

08 / 17 / 2012

Transaction ID : 20324648

Amount of Each Receipt this Period

7.50

Full Name (Last, First, Middle Initial)

**C. Mr. Larry Di Santo**

Mailing Address 46 Oakmont Road

City

Lakewood

State

NJ

Zip Code

08701-5764

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Health

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 17 / 2012

Transaction ID : 20324650

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

607.50

**SCHEDULE A (FEC Form 3X)**  
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<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Dr. Dennis J Dooley MD**

Mailing Address 63 Dogwood Lane

City

Newtown

State

PA

Zip Code

18940-9653

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Health

Occupation

Vice President Planning and Developmen

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2012

**Transaction ID : 20324652**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Mr. Shane F. Fleming**

Mailing Address 1308 Jankowski Court

City

South Plainfield

State

NJ

Zip Code

07080-2450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Health

Occupation

COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2012

**Transaction ID : 20324655**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Mr. Jan Gabin**

Mailing Address 511 Liberty Drive

City

Yardley

State

PA

Zip Code

19067-4510

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Health

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2012

**Transaction ID : 20324656**

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

900.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr Eugene Grochala**

Mailing Address 3 Barto Way

City

Robbinsville

State

NJ

Zip Code

08691-2421

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Health

Occupation

Vice President Information Systems

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 17 / 2012

Transaction ID : 20324658

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Sean J. Hopkins**

Mailing Address 6180 Lower Mountain Road

City

New Hope

State

PA

Zip Code

18938-5760

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

Sr. VP., Health Economics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1735.61

Date of Receipt

08 / 17 / 2012

Transaction ID : 20324659

Amount of Each Receipt this Period

7.50

Full Name (Last, First, Middle Initial)

## **C. Mr. E Joseph Hummel Jr.**

Mailing Address 1 West South 31st Street

City

Long Beach Township

State

NJ

Zip Code

08008-2680

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Meridian Health

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

08 / 17 / 2012

Transaction ID : 20324660

Amount of Each Receipt this Period

262.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

570.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. William D. Kennedy**

Mailing Address 1549 North Valley Road

City State Zip Code  
Malvern PA 19355-9796

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1222.50

Date of Receipt

08 / 17 / 2012

**Transaction ID : 20324662**

Amount of Each Receipt this Period

7.50

Full Name (Last, First, Middle Initial)

**B. Dr. Al Maghazehe PhD, FACHE**

Mailing Address 314 Stoney Ford Road

City State Zip Code  
Holland PA 18966-2510

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Health

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

08 / 17 / 2012

**Transaction ID : 20324668**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. Mr. Stephen Miller**

Mailing Address 1939 Maplewood Avenue

City State Zip Code  
Abington PA 19001-1107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Health

Occupation

CCO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 17 / 2012

**Transaction ID : 20324670**

Amount of Each Receipt this Period

300.00

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1807.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Randall J. Minniear**

Mailing Address 3901 Worthington Court

City

Freehold

State

NJ

Zip Code

7728

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

Senior VP, Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1597.50

Date of Receipt

08 / 17 / 2012

Transaction ID : 20324671

Amount of Each Receipt this Period

7.50

Full Name (Last, First, Middle Initial)

**B. Mr. Robert J. Remstein**

Mailing Address 197 Anselm Road

City

Richboro

State

PA

Zip Code

18954-2032

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Health

Occupation

Vice President Medical Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 17 / 2012

Transaction ID : 20324675

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Mr. John J. Dawidowski**

Mailing Address 17 Brookshire Drive

City

Robbinsville

State

NJ

Zip Code

08691-2554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

Vice President & General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1233.75

Date of Receipt

08 / 31 / 2012

Transaction ID : 20324693

Amount of Each Receipt this Period

7.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

315.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Leslie D Hirsch FACHE**

Mailing Address 28 MacKenzie Lane North

City

Denville

State

NJ

Zip Code

07834-2954

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Saint Clare's Health System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

757.53

Date of Receipt

08 / 31 / 2012

Transaction ID : 20324698

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Mr. Sean J. Hopkins**

Mailing Address 6180 Lower Mountain Road

City

New Hope

State

PA

Zip Code

18938-5760

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

Sr. VP., Health Economics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1773.73

Date of Receipt

08 / 31 / 2012

Transaction ID : 20324699

Amount of Each Receipt this Period

38.12

Full Name (Last, First, Middle Initial)

**C. Mr. William D. Kennedy**

Mailing Address 1549 North Valley Road

City

Malvern

State

PA

Zip Code

19355-9796

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1230.00

Date of Receipt

08 / 31 / 2012

Transaction ID : 20324700

Amount of Each Receipt this Period

7.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

195.62

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Randall J. Minniear**

Mailing Address 3901 Worthington Court

City State Zip Code  
Freehold NJ 7728

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

Senior VP, Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1605.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2012

**Transaction ID : 20324706**

Amount of Each Receipt this Period

7.50

Full Name (Last, First, Middle Initial)

**B. Mr. Roger S John**

Mailing Address P O Box 366

City State Zip Code  
Phillipsburg KS 67661-0366

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Great Plains Health Alliance, Inc.

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2012

**Transaction ID : 20324908**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Eugene W Meyer**

Mailing Address 325 Maine Street

City State Zip Code  
Lawrence KS 66044-1360

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lawrence Memorial Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2012

**Transaction ID : 20326316**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

507.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Bob Page**

Mailing Address 3901 Rainbow Boulevard

City  
Kansas City

State Zip Code  
KS 66160-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Kansas Hospital, The

Occupation  
Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 31 / 2012

**Transaction ID : 20326824**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Dr. Kent Palmberg MD**

Mailing Address 1500 SW Tenth Avenue

City  
Topeka

State Zip Code  
KS 66604-1301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Stormont-Vail HealthCare

Occupation  
Senior Vice President and Chief Medical Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 31 / 2012

**Transaction ID : 20326825**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Mrs. Janet Stanek**

Mailing Address 6755 SW Dancastr Road

City  
Topeka

State Zip Code  
KS 66610-1412

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Stormont-Vail HealthCare

Occupation  
Sr. Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 31 / 2012

**Transaction ID : 20326839**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Melinda Reid Hatton**Mailing Address 325 Seventh Street, NW  
Suite 700

City Washington State DC Zip Code 20004-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Vice President &amp; General Course

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR1045726226733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Mr. David Schulke**Mailing Address 325 Seventh Street, NW  
Suite 700

City Washington State DC Zip Code 20004-2801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

VP Research Programs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR1057462126733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Ms. Sarah B. Macchiarola**Mailing Address 325 Seventh Street, NW  
Suite 700

City Washington State DC Zip Code 20004-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR1082532726733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

180.82

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Ms. Barbara Jellen**

Mailing Address 325 Seventh Street, NW  
Suite 700

City Washington State DC Zip Code 20004-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Section Director, Constituency Section

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1113464226733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. Ms. Lisa Allen**

Mailing Address One North Franklin

City Chicago State IL Zip Code 60606-3436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Sr. Vice President, Chief Human Resour

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1118928226733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. Ms. Mary Meadows**

Mailing Address One North Franklin

City Chicago State IL Zip Code 60606-3436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Director of Professional Practice, AON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1260472926733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

80.82

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Jack A. Mackay**

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President & CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1347703626733**

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Ms. Susan Gergely**

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Director of Operations, AONE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1347791026733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Ms. Heather Drevna**

Mailing Address 3205 Ravensworth PL

City

Alexandria

State

VA

Zip Code

22302-2107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director Advocacy and Member Communica

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1348169726733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

92.36

# SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

**A. Ms. Sharon Allen**

Mailing Address 155 North Wacker Drive

City State Zip Code  
Chicago IL 60606-1709

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Membership and Marketing Manager ASHR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

Transaction ID : PR1474886226733

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Mr. Mark Colucci**

Mailing Address 1061 N Penny Ln

City State Zip Code  
Palatine IL 60067-1821

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

National Director Sponsorship and Unde

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

08 / 31 / 2012

Transaction ID : PR1475133726733

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Ms. Fannie D. Wade**

Mailing Address 7706 Heartwood Lane

City State Zip Code  
Upper Marlboro MD 20772-4323

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Executive Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.83

Date of Receipt

08 / 31 / 2012

Transaction ID : PR1476385726733

Amount of Each Receipt this Period

31.82

P/R Deduction (\$15.91 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

97.24

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Stephanie H. Drake**

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Associate Executive Director - ASHHRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1492459926733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Ms. Monica D Day**

Mailing Address 4321 Telfair Blvd  
D319

City

Suitland

State

MD

Zip Code

20746-4271

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Political Affairs Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1516850626733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Ms. Elisa Arespachaga**

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Associate Director, Constituency Secti

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1555656226733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

130.82

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Clinton S. Manning**

Mailing Address 325 Seventh Street, NW  
Suite 700

City Washington State DC Zip Code 20004-2802

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Asst. Director Advocacy & Member Commu

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.52

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1555656526733**

Amount of Each Receipt this Period

13.47

P/R Deduction (\$13.47 )

Full Name (Last, First, Middle Initial)

## **B. Ms. Kathy Poole**

Mailing Address One North Franklin

City Chicago State IL Zip Code 60606-3436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Director, Governance Projects

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1589439926733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. Ms. Kimberly Baker**

Mailing Address One North Franklin

City Chicago State IL Zip Code 60606-3436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Director Travel Meeting Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1590809126733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

67.35

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Robert Kehoe**

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Associate Publisher Vertical Magazines

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1625368326733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Mr. Stephen Hines**

Mailing Address 155 North Wacker Drive

City

Chicago

State

IL

Zip Code

60606-1709

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

VP, Research HRET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1648726626733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Ms. Lisa Grabert**

Mailing Address 325 Seventh Street, NW  
Suite 700

City

Washington

State

DC

Zip Code

20004-2801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director, Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1671258626733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 )

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

130.82

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Erik Rasmussen**

Mailing Address 325 Seventh Street, NW  
Suite 700

City State Zip Code  
Washington DC 20004-2801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1819487926733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. Ms. Aimee Hartlage**

Mailing Address 325 Seventh Street, NW  
Suite 700

City State Zip Code  
Washington DC 20004-2801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director Fed. Relatio

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1877582326733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. Ms. Shari Dexter**

Mailing Address 325 Seventh Street, NW  
Suite 700

City State Zip Code  
Washington DC 20004-2801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director, Political Action

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1878189826733**

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

142.36

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 119 OF 151

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Ms. Evelyn Knolle**

Mailing Address 325 Seventh Street, NW

City  
Washington

State Zip Code  
DC 20004-2802

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director, Policy -TR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1913190726733**

Amount of Each Receipt this Period

55.56

P/R Deduction (\$27.78 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. Ms. Janet Henderson**

Mailing Address 155 North Wacker Drive

City  
Chicago

State Zip Code  
IL 60606-1709

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Director, Member Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.60

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR1937843126733**

Amount of Each Receipt this Period

41.68

P/R Deduction (\$20.84 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. Ms. Linda Fishman**

Mailing Address 325 Seventh Street, NW  
Suite 700

City  
Washington

State Zip Code  
DC 20004-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Vice President, Public Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR327629126733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

174.18

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 120 OF 151

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael P. McCue**

Mailing Address 122 N. Greenwood Avenue

City

Park Ridge

State

IL

Zip Code

60068-3227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Associate Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR327771626733**

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Ms. Suzanne R. Sonik**

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Director, Long-Term Care

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.74

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR32777226733**

Amount of Each Receipt this Period

39.44

P/R Deduction (\$19.72 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Ms. Debra J. Stock**

Mailing Address 1022 S. Harvey Avenue

City

Oak Park

State

IL

Zip Code

60304-2132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President, Member Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR32777826733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

154.86



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 121 OF 151

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Neil J. Jesuele**

Mailing Address 1003 Kimberly Place

City

Great Falls

State

VA

Zip Code

22066-1546

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR327801726733**

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Ms. Pamela Austin Thompson RN, MSN**Mailing Address 325 Seventh Street, NW  
Suite 700

City

Washington

State

DC

Zip Code

20004-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Chief Executive Officer, AONE &amp; Sr. Vi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR327812026733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Ms. Joan H. Lewis**

Mailing Address 6034 North 22nd Street

City

Arlington

State

VA

Zip Code

22205-3408

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR327831726733**

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

153.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 122 OF 151  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Robert J. Donovan**

Mailing Address One North Franklin Street

City	State	Zip Code
Chicago	IL	60606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President, Meetings &amp; Travel Serv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2012

**Transaction ID : PR327846226733**

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Ms. Ellen A. Pryga**Mailing Address 2401 Calvert Street, NW  
Apt. 1008

City	State	Zip Code
Washington	DC	20008-2614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director, Policy Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2012

**Transaction ID : PR327851926733**

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Mr. Mark Seklecki**Mailing Address 325 Seventh Street, NW  
Suite 700

City	State	Zip Code
Washington	DC	20004-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Vice President, Political Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2012

**Transaction ID : PR327858026733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

153.90

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. John F. Barry**

Mailing Address One North Franklin

City	State	Zip Code
Millis	MA	60606-3436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR327877826733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Mr. George F. Bergstrom**Mailing Address 130 North Garland Court  
#3002

City	State	Zip Code
Chicago	IL	60602-4750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR327895726733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Ms. Eileen M. Collins Offner**Mailing Address 325 Seventh Street, NW  
Suite 700

City	State	Zip Code
Washington	DC	20004-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director Policy Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR327906126733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

180.82

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Judy Williams**

Mailing Address One North Franklin Street

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Director Membership

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR327918926733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Mr. Richard J. Umbdenstock**Mailing Address 325 Seventh Street, NW  
Suite 700

City

Washington

State

DC

Zip Code

20004-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR328132826733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Ms. Barbara Lorsbach**

Mailing Address 204 7th Ave

City

La Grange

State

IL

Zip Code

60525-6406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Sr. Vice President, Member Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR328136926733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Donna J. Melkonian**

Mailing Address 5545 North Wayne

City

Chicago

State

IL

Zip Code

60640-1318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

653.99

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR328223826733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Mr. Ron O. Purcell**

Mailing Address 1093 N. Faldo Way

City

Eagle

State

ID

Zip Code

83616-5369

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

622.44

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR328241426733**

Amount of Each Receipt this Period

83.92

P/R Deduction (\$41.96 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Mr. Richard J. Pollack**

Mailing Address 3475 North Venice Street

City

Arlington

State

VA

Zip Code

22207-4446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Executive Vice President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

653.99

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR328260926733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

237.80

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Ms. Carolyn Forcina**

Mailing Address 200 Clover Hill Court

City

Yardley

State

PA

Zip Code

19067-5736

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR328511826733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. Ms. Alicia N. Mitchell**

Mailing Address 1501 N. Harrison Street

City

Arlington

State

VA

Zip Code

22205-2726

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Vice President, Communications

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.92

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR328512026733**

Amount of Each Receipt this Period

94.00

P/R Deduction (\$47.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. Mr. George Arges**

Mailing Address One North Franklin St.

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Senior Director, Health Data Managemen

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR328641126733**

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

209.42

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 OF 151

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

**A. Mr. Anthony J. Burke**

Mailing Address One North Franklin Ave.

City	State	Zip Code
Chicago	IL	60606

FEC ID number of contributing federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

President &amp; CEO, AHA Solutions, Inc. &amp;

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2012

Transaction ID : PR328913326733

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Ms. Rebecca Chickey**

Mailing Address One North Franklin Street

City	State	Zip Code
Chicago	IL	60606

FEC ID number of contributing federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

SPSA Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2012

Transaction ID : PR329013426733

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Dr. John R. Combes**

Mailing Address One North Franklin

City	State	Zip Code
Chicago	IL	60606-3436

FEC ID number of contributing federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

President &amp; Chief Operating Officer, C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2012

Transaction ID : PR329071326733

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

192.36

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 128 OF 151  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Robyn L. Bash**Mailing Address 325 Seventh Street, NW  
Suite 700

City	State	Zip Code
Washington	DC	20004-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR329084426733**

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 )

Full Name (Last, First, Middle Initial)

**B. Mr. W. Thomas Deweese**

Mailing Address 500 Interstate Boulevard South

City	State	Zip Code
Nashville	TN	37210-4634

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

AHA Regional Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR329215726733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Mr. John Evans**

Mailing Address One North Franklin Street

City	State	Zip Code
Chicago	IL	60606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Senior Vice President &amp; CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR329342626733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

142.36



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 129 OF 151

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Audrey L. Harris**

Mailing Address 1136 W. Farwell Ave.

City

Chicago

State

IL

Zip Code

60626-3861

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Executive Director, ASDVS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

Transaction ID : PR329654226733

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Ms. Patricia Meersman**

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Senior Director Member Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

08 / 31 / 2012

Transaction ID : PR330343326733

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Mr. Thomas Misfeldt**

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Associate Regional Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

622.44

Date of Receipt

08 / 31 / 2012

Transaction ID : PR330411626733

Amount of Each Receipt this Period

83.92

P/R Deduction (\$41.96 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

149.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 130 OF 151

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Maureen D. Mudron**

Mailing Address 325 Seventh Street, NW  
Suite 700

City State Zip Code  
Washington DC 20004-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Deputy General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR330465226733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Mr. Paul N. Muraca**

Mailing Address 4960 138th Circle West

City State Zip Code  
Apple Valley MN 55124-9229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR330475426733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Mr. Gene O'Dell**

Mailing Address One North Franklin

City State Zip Code  
Chicago IL 60606-3436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President, Strategic Planning

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR330547726733**

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

142.36

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Eileen O'Keefe**

Mailing Address 172 Atteridge

City

Lake Forest

State

IL

Zip Code

60045-1715

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President, Constituency Section

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

08 / 31 / 2012

Transaction ID : PR330549226733

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Mr. Anthony Spohn**

Mailing Address 3219 N. Oriole

City

Chicago

State

IL

Zip Code

60634-3232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Executive Director, Associate Membersh

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

08 / 31 / 2012

Transaction ID : PR331098326733

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Ms. Debi H. Tucker Esq.**

Mailing Address 1101 N. Kentucky Street

City

Arlington

State

VA

Zip Code

22205-3515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director, State Issues Forum

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.74

Date of Receipt

08 / 31 / 2012

Transaction ID : PR331278826733

Amount of Each Receipt this Period

39.44

P/R Deduction (\$19.72 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

154.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 132 OF 151

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

**A. Ms. Darlene S. Vanderbush**

Mailing Address 26 West Glendale Ave.

City	State	Zip Code
Alexandria	VA	22301-2402

FEC ID number of contributing federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director Advocacy and Public Policy Op

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2012

Transaction ID : PR331304226733

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Ms. Jo Ann Webb**Mailing Address 325 Seventh Street, NW  
Suite 700

City	State	Zip Code
Washington	DC	20004-2818

FEC ID number of contributing federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Sr. Director Federal Relations &amp; Polic

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2012

Transaction ID : PR331379126733

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Ms. Judy Weinsheimer**Mailing Address 325 Seventh Street, NW  
Suite 700

City	State	Zip Code
Washington	DC	20004-2818

FEC ID number of contributing federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2012

Transaction ID : PR331386926733

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.82

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Dale Woodin**

Mailing Address 800 W. Central Road

City

Arlington Heights

State

IL

Zip Code

60005-2349

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Executive Director, ASHE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR331481326733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Mr. Donald May**

Mailing Address 521 Great Falls St.

City

Falls Church

State

VA

Zip Code

22046-2613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Vice President, Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR331533226733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 )

Full Name (Last, First, Middle Initial)

**C. Ms. Elizabeth Summy**

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President, PMG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR346168126733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

180.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 134 OF 151

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Megan Cundari**Mailing Address 325 Seventh Street, NW  
Suite 700

City	State	Zip Code
Washington	DC	20004-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2012

**Transaction ID : PR518031926733**

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Ms. Laura M. Werner**Mailing Address 325 Seventh Street, NW  
Suite 700

City	State	Zip Code
Washington	DC	20004-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Associate Director, Political Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2012

**Transaction ID : PR560101526733**

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Mr. Carlos Jackson**

Mailing Address 325 Seventh Street, NW

City	State	Zip Code
Washington	DC	20004-2802

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Associate Director, Federal Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2012

**Transaction ID : PR566280926733**

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

153.90

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Ashley B. Thompson**

Mailing Address 606 S. Royal St.

City

Alexandria

State

VA

Zip Code

22314-4142

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director, Policy

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

483.23

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR766023726733**

Amount of Each Receipt this Period

59.30

P/R Deduction (\$29.65 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Ms. Rochelle M. Archuleta**Mailing Address 325 Seventh Street, NW  
Suite 700

City

Washington

State

DC

Zip Code

20004-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director Policy

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

228.99

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR801366326733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Ms. Lisa Kidder Hrobksy**Mailing Address 325 Seventh Street, NW  
Suite 700

City

Washington

State

DC

Zip Code

20004-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Vice President, Legislative Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

327.08

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	2		

**Transaction ID : PR876637226733**

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

124.72

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Jennifer Armstrong Gay**

Mailing Address 10702 Benning Way

City

Spotsylvania

State

VA

Zip Code

22551-4670

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director Communication Strategies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR928186526733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Mr. David A. Strickland**

Mailing Address One N. Franklin Street

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Executive Director Quality Center

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.99

Date of Receipt

08 / 31 / 2012

**Transaction ID : PR939603926733**

Amount of Each Receipt this Period

26.94

P/R Deduction (\$13.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

53.88

**TOTAL** This Period (last page this line number only)..... ►

114874.68



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. California Healthcare Association PAC - Federal**

Mailing Address 1215 K Street  
Suite 800

City State Zip Code  
Sacramento CA 95814

FEC ID number of contributing  
federal political committee.

**C** C00237495

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

**08** / **02** / **2012**

**Transaction ID : 20267989**

Amount of Each Receipt this Period

20000.00

Full Name (Last, First, Middle Initial)

## **B. AZHHA Political Action Committee (Federal)**

Mailing Address 2901 North Central Avenue  
Suite 900

City State Zip Code  
Phoenix AZ 85012

FEC ID number of contributing  
federal political committee.

**C** C00217687

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**08** / **22** / **2012**

**Transaction ID : 20288698**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. California Healthcare Association PAC - Federal**

Mailing Address 1215 K Street  
Suite 800

City State Zip Code  
Sacramento CA 95814

FEC ID number of contributing  
federal political committee.

**C** C00237495

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213000.00

Date of Receipt

**08** / **27** / **2012**

**Transaction ID : 20288797**

Amount of Each Receipt this Period

13000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

38000.00

38000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

## **A. TD Bank**

Mailing Address 901 Seventh Street, NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2310.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2012

**Transaction ID : 20327129**

Amount of Each Receipt this Period

324.15

Interest Earned

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

324.15

324.15

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Paymentech**Mailing Address 14221 Dallas Parkway  
Building Two

City Dallas State TX Zip Code 75254

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 06 2012**Transaction ID : 20327127**

Amount of Each Disbursement this Period

29.80

Merchant Fees

Full Name (Last, First, Middle Initial)

**B. Newtek Merchant Solutions**

Mailing Address 744 N 4th Street

City Milwaukee State WI Zip Code 53203

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 03 2012**Transaction ID : 20327128**

Amount of Each Disbursement this Period

91.80

Merchant Fees

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Merchant Fees

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.60

121.60

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Friends Of Lois Capps**

Mailing Address P.O. Box 23940

City	State	Zip Code
Santa Barbara	CA	93121

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Lois Capps**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2012

**Transaction ID : 20261985**

Amount of Each Disbursement this Period

2500.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. Ribble For Congress**

Mailing Address PO Box 7200

City	State	Zip Code
Appleton	WI	54912

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Reid J. Ribble**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2012

**Transaction ID : 20261988**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**C. Friends Of Cliff Stearns**

Mailing Address PO Box 308

City	State	Zip Code
Silver Springs	FL	34489

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Clifford B. Stearns**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2012

**Transaction ID : 20261990**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. King For Congress**Mailing Address 116 N Main St.  
PO Box 400

City Early State IA Zip Code 50535

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Steve A. King**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2012

**Transaction ID : 20261991**

Amount of Each Disbursement this Period

2500.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. Grace for New York**

Mailing Address 49-04 - 43rd Avenue

City Woodside State NY Zip Code 11377

Purpose of Disbursement  
Contribution

Candidate Name

**Grace Meng**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2012

**Transaction ID : 20261996**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**C. Citizens To Elect Rick Larsen**

Mailing Address PO Box 326

City Everett State WA Zip Code 98206

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Rick Larsen**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2012

**Transaction ID : 20262059**

Amount of Each Disbursement this Period

1500.00
---------

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Nita Lowey For Congress**

Mailing Address PO Box 271

City  
White PlainsState  
NYZip Code  
10605Purpose of Disbursement  
Contribution

011

Candidate Name

**Rep. Nita M. Lowey**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2012

**Transaction ID : 20262062**

Amount of Each Disbursement this Period

2500.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. Pete King For Congress Committee**

Mailing Address PO Box 1428

City  
SeafordState  
NYZip Code  
11783Purpose of Disbursement  
Contribution

011

Candidate Name

**Rep. Peter T. King**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2012

**Transaction ID : 20262063**

Amount of Each Disbursement this Period

2000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**C. Friends Of Carolyn McCarthy**

Mailing Address 151 Linden Road

City  
MineolaState  
NYZip Code  
11501Purpose of Disbursement  
Contribution

011

Candidate Name

**Rep. Carolyn McCarthy**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2012

**Transaction ID : 20262076**

Amount of Each Disbursement this Period

2000.00
---------

Contribution

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6500.00
---------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. George Holding For Congress**

Mailing Address PO Box 97187

City	State	Zip Code
Raleigh	NC	27624

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. George Holding**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2012

**Transaction ID : 20262116**

Amount of Each Disbursement this Period

5000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. Doug Lamalfa Committee**

Mailing Address 2150 River Plaza Dr., #150

City	State	Zip Code
Sacramento	CA	95833

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Doug Lamalfa**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2012

**Transaction ID : 20262118**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**C. Charles Boustany Jr. MD For Congress, Inc.**

Mailing Address PO Box 80126

City	State	Zip Code
Lafayette	LA	70598

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Charles W. Boustany Jr.**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: LA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	13	/	2012

**Transaction ID : 20272351**

Amount of Each Disbursement this Period

500.00
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Contribution

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6500.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Charles Boustany Jr. MD For Congress, Inc.**

Mailing Address PO Box 80126

City Lafayette	State LA	Zip Code 70598
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Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Charles W. Boustany Jr.**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2012

**Transaction ID : 20272461**

Amount of Each Disbursement this Period

4500.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. Mark Pocan For Congress**

Mailing Address 309 N Baldwin St

City Madison	State WI	Zip Code 53703
-----------------	-------------	-------------------

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Mark Pocan**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2012

**Transaction ID : 20272771**

Amount of Each Disbursement this Period

1000.00
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Contribution

Full Name (Last, First, Middle Initial)

**C. Michael Burgess For Congress**

Mailing Address PO Box 2334

City Denton	State TX	Zip Code 76202
----------------	-------------	-------------------

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Michael C. Burgess M.D.**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 26

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2012

**Transaction ID : 20274150**

Amount of Each Disbursement this Period

1000.00
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Contribution

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6500.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Gene Green Congressional Campaign**

Mailing Address PO Box 16128

City	State	Zip Code
Houston	TX	77222

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Gene Green**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 29

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2012

**Transaction ID : 20274152**

Amount of Each Disbursement this Period

3500.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. Kurt Schrader For Congress**

Mailing Address PO Box 3314

City	State	Zip Code
Oregon City	OR	97045

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Kurt Schrader**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OR District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2012

**Transaction ID : 20274153**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**C. McNerney For Congress**

Mailing Address P.O. Box 690371

City	State	Zip Code
Stockton	CA	95269

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Jerry McNerney**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2012

**Transaction ID : 20274155**

Amount of Each Disbursement this Period

1000.00
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Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Loeb sack For Congress**

Mailing Address PO Box 3013

City	State	Zip Code
Iowa City	IA	52244

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. David Wayne Loeb sack**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2012

**Transaction ID : 20274156**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. Jim Risch For U.S. Senate Committee**

Mailing Address 407 W Jefferson Street

City	State	Zip Code
Boise	ID	83702

Purpose of Disbursement  
2014 Contribution

Candidate Name

**Sen. James E. Risch**Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: ID District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2012

**Transaction ID : 20274157**

Amount of Each Disbursement this Period

1000.00
---------

2014 Contribution

Full Name (Last, First, Middle Initial)

**C. Gardner For Congress**

Mailing Address PO Box 2408

City	State	Zip Code
Loveland	CO	80539

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Cory Gardner**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2012

**Transaction ID : 20274158**

Amount of Each Disbursement this Period

5000.00
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Contribution

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Nancy Pelosi For Congress**Mailing Address 700 13th Street, NW  
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Nancy Pelosi**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2012

**Transaction ID : 20274159**

Amount of Each Disbursement this Period

5000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. Michael Grimm For Congress**

Mailing Address PO Box 61806

City Staten Island State NY Zip Code 10306

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Michael G. Grimm**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2012

**Transaction ID : 20274160**

Amount of Each Disbursement this Period

2000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**C. Bill Owens For Congress**

Mailing Address PO Box 1575

City Plattsburgh State NY Zip Code 12901

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Bill Owens**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2012

**Transaction ID : 20274162**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Paul Gosar For Congress**

Mailing Address P.O. Box 3586

City	State	Zip Code
Flagstaff	AZ	86003

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Paul R. Gosar**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: AZ	District: 04

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2012

**Transaction ID : 20290795**

Amount of Each Disbursement this Period

3000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. Forward Together PAC**Mailing Address 201 N. Union Street  
Suite 300

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement  
2012 Contribution

Candidate Name

**Forward Together PAC**

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2012

**Transaction ID : 20290797**

Amount of Each Disbursement this Period

2500.00
---------

2012 Contribution

Full Name (Last, First, Middle Initial)

**C. Brian Higgins For Congress**

Mailing Address P.O. Box 28

City	State	Zip Code
Buffalo	NY	14220

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Brian M. Higgins**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: NY	District: 26

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2012

**Transaction ID : 20290798**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6500.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Collins For Congress**

Mailing Address PO Box 1295

City	State	Zip Code
Gainesville	GA	30503

Purpose of Disbursement  
Contribution

Candidate Name

**Mr. Douglas Collins**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) ▼

State: GA District: 09

Runoff2012

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2012

**Transaction ID : 20290801**

Amount of Each Disbursement this Period

2000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. GOP Generation Y Fund**

Mailing Address PO Box 10555

City	State	Zip Code
Peoria	IL	61612

Purpose of Disbursement  
2012 Contribution

Candidate Name

**GOP Generation Y Fund**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2012

**Transaction ID : 20290802**

Amount of Each Disbursement this Period

2000.00
---------

2012 Contribution

Full Name (Last, First, Middle Initial)

**C. Feinstein For Senate**

Mailing Address 1801 Avenue Of The Stars Suite 829

City	State	Zip Code
Los Angeles	CA	90067

Purpose of Disbursement  
Contribution

Candidate Name

**Sen. Dianne Feinstein**Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2012

**Transaction ID : 20323357**

Amount of Each Disbursement this Period

1000.00
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Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American Hospital Association PAC**

Full Name (Last, First, Middle Initial)

**A. Pete Stark Re-Election Committee**

Mailing Address P.O. Box 8331

City	State	Zip Code
Fremont	CA	94537

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Pete Stark**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CA District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2012

**Transaction ID : 20323359**

Amount of Each Disbursement this Period

3000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. Friends Of Sherrod Brown**

Mailing Address PO Box 76187

City	State	Zip Code
Washington	DC	20013

Purpose of Disbursement  
Contribution

Candidate Name

**Sen. Sherrod Brown**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2012

**Transaction ID : 20323366**

Amount of Each Disbursement this Period

1500.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**C. John Carter For Congress**Mailing Address 1717 North Ih-35  
Suite 304

City	State	Zip Code
Round Rock	TX	78664

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. John R. Carter**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TX District: 31

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2012

**Transaction ID : 20323368**

Amount of Each Disbursement this Period

1000.00
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Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5500.00
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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

American Hospital Association PAC

### A. Friends Of Cliff Stearns



011

Rep. Clifford B. Stearns

Category/  
Type

Disbursement For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

## Contribution

**B.**

Candidate Name

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

C.

### Purpose of Disbursement

Candidate Name

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

68000.00